FALL SOCCER LEAGUE



Boys & Girls Pre-K to Grade 8 (2025-26 school year)

REGISTRATION DEADLINE: FRI, JULY 25

WHO:

Co-Ed Tiny Tots (PreK-4 yrs)
Co-Ed Tots (Kindergarten)
Boys/Girls Small Fry (Grade 1, 2, 3)
Boys/Girls JV (Grade 4, 5, 6)
Co-Ed Varsity (Grade 7 & 8)

Sundays,
August 23 to
October 26

Resident \$120 Non-Res \$151

WHEN:

Saturdays &

The program is designed to teach the game of soccer, promote interaction, and teach game concepts. Soccer jersey is included in the fee. Each participant must supply their own shin guards, with soccer spikes recommended but not required. This league is for recreational soccer players. We are looking for volunteer coaches.

LOCATION & GAME TIMES
TO BE DETERMINED
ONCE ENROLLMENT
ENDS.



Niles Park District FALL SOCCER Registration Form

Player Name Gender Age Grade School Co-Ed Tiny Tots (Pre K-4 years) #420301-02	Primary Household Contact (First Name)					Last Name)	
Email Address Do you need an Americans with Disabilities Act Accommodation? Yes	Address				City/Zip		
Player Name Gender Age Grade School Co-Ed Tiny Tots (Pre K-4 years) #420301-02 Girls Small Fry (1st, 2nd, 3rd Grade #420301-03 Boys Small Fry (1st, 2nd, 3rd Grade #420301-03 Boys Small Fry (1st, 2nd, 3rd Grade #420301-05 Girls JV (4th, 5th, 6th Grade) #420301-05 Girls JV (4th, 5th, 6th Grade) #420301-05 Government of the people you would like to be on the same team with. #420301-05 Government of the people you would like to be on the same team with. #420301-05 Government of the people you would like to be on the same team with. #420301-05 Government of the people you would like to be on the same team with. #420301-05 Government of the people you would like to be not the same team with. #420301-05 Government of the people you would like to be not the same team with. #420301-05 Government of the people you would like to be not the same team with. #420301-05 Government of the people you would like to be not the same team with. #420301-05 Government of the people you would like to be not the same team with. #420301-05 Government of the people you would like to be not the same team with. #420301-05 Government of the people you would like to be not the same team with. #420301-05 Government of the people you would like to be not the same team with the same team to the same team with the same team the same team with the same team with the same team the same team with the same team	Phone				Emergency Ph	one	
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Player Name Gender Age Grade School Co-Ed Tiny Tots (Pre K-4 years) #420301-01 Co-Ed Tots (Kindergarten) #420301-02 Girls Small Fry (1st, 2nd, 3rd Grade #420301-03 Boys Small Fry (1st, 2nd, 3rd Grade #420301-05 Co-Ed Varsity (7th & 8th Grade) #420301-05 Boys IV (4th, 5th, 6th Grade) #420301-06 Co-Ed Varsity (7th & 8th Grade) #420301-07 FEE: Resident \$120, Non-Resident \$1 TOTAL Due: \$ Register Online: www-niles-parks.org WAIVER AND RELEASE OF ALL CLAIMS Please read this form carefully and be aware that in signing up and participating in this program you will be waving and releasing all claims for injuries you might sustain arising out of this program. Please read this form carefully and be aware that in signing up and participating in this program you will be waving and releasing all claims for injuries you might sustain arising out of this program. Please read and acknowledge that there are cortain risks of physical injury to participants in these programs/activities, and a voluntarily agree to assu the full risk of any and all injuries, damages or loss, regardees of seventy, that my minor child/ward or I may sustain as a result of participating in all those programs/activities (including transportation service-web) operation, when provided on line or is fax, you on-line or folkedine legislatus in district, including the claims for injuries, damages, or loss which you or your minor child/ward and arising out of connected with on the programs/activities, and a voluntarily agree to assu the full risk of any and all injuries, damages or loss, regardees of seventy, that my min	Do you need an Am	nericans with Disa	bilities Act	Accommodat	tion? Yes	Please circle the correct league	
COACH NAME: PHONE: Girls Small Fry (1st, 2nd, 3rd Grade #420301-03 CARPOOL REQUESTS: Boys Multiple to be a volunteer coach Boys Small Fry (1st, 2nd, 3rd Grade #420301-04 **Please list the names of the people you would like to be on the same team with. **We will do our best to accommodate requests, but all may not be possible. **METHOD OF PAYMENT Signature Payment Paym	Player Name	Gender	Age	Grade	School	Co-Ed Tiny Tots (Pre K-4 years)	
(Please indicate if you would like to be a volunteer coach) CARPOOL REQUESTS: #42/0301-03 Boys Small Fry (1st, 2nd, 3rd Grade #42/0301-04 Girls JV (4th, 5th, 6th Grade) #42/0301-05 We will do our best to accommodate requests, but all may not be possible. #42/0301-05 Boys JV (4th, 5th, 6th Grade) #42/0301-05 Boys JV (4th, 5th, 6th Grade) #42/0301-05 Boys JV (4th, 5th, 6th Grade) #42/0301-06 Co-Ed Varsity (7th & 8th Grade) #42/0301-07 Card #							
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Boys JV (4th, 5th, 6th Grade) #420301-06 #420301-06 #420301-06 #420301-06 #420301-06 #420301-06 #420301-07		mes of the people	you would	like to be on t	the same team with.		
Co-Ed Varsity (7th & 8th Grade) (As it appears on card) Card # Signature Amount \$ Mail to: Niles Park District Registration, 6676 W. Howard St., Niles IL 60714 In Person: Howard Leisure Center, 6676 W. Howard St. (M-F 8:30 am-5:00 pm) Email to: Robin at robin@niles-parks.org Call: 847-967-6633 Register Online: www-niles-parks.org Call: 847-967-6633 WAIVER AND RELEASE OF ALL CLAIMS Please read this form carefully and be aware that in signing up and participating in this program you will be waving and releasing all claims for injuries you might sustain arising out of this programs. Please read this form carefully and be aware that in signing up and participating in the above identified programs/activities, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might susta as a result of participating in any and all activities connected with and associated with said programs/activities, and I voluntarily agree to assument that the provided.) I recognize and acknowledge that there are certain risks of physical injury to participants in these programs/activities, and I voluntarily agree to assument that the programs/activities against the Niles Park District, including its officials, agents, volunteers and employees (here-in after collectively referred a "District"). I do hereby fully release and forever discharge the District from all claims for injuries, damages, or loss that my minor child/ward or I may have, or which may accrue to me or my minor child/ward and arising out of connected with, or in any way associated with these programs/activities. If registering on-line or via fax, your on-line or facsimile signature shall substitute for and have the same legal effects as an original form signature. Additionally, by signing this form, I am certifying that I qualify for the rate charged (i.e., if resident rate was charged, I amimy robindren are residents to the Niles Park District, if this is proven u	METHOD OF PAYM	<u>1ENT</u>	·		<u> </u>	1 1	
Mail to: Niles Park District Registration, 6676 W. Howard St., Niles IL 60714 In Person: Howard Leisure Center, 6676 W. Howard St. (M-F 8:30 am-5:00 pm) Email to: Robin at robin@niles-parks.org Register Online: www-niles-parks.org WAIVER AND RELEASE OF ALL CLAIMS Please read this form carefully and be aware that in signing up and participating in this program. Please read this form carefully and be aware that in signing up and participating in this program. Please read this form carefully and be aware that in signing up and participating in the above identified programs/activities, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might susts as a result of participating in any and all activities connected with and associated with said programs/activities (including transportation services/veh operation, when provided.) I recognize and acknowledge that there are certain risks of physical injury to participants in these programs/activities, and I voluntarily agree to assu the full risk of any and all injuries, damages or loss vities of participating in all these programs/activities against the Niles Park District, including its officials, agents, volunteers and employees (here-in after collectively referred a "District"). I do hereby fully release and forever discharge the District from all claims for injuries, damages, or loss that my minor child/ward or I may have, or which may accrue to me or my minor child/ward and arising out of connected with, or in any way associated with these programs/activities. If registering on-line or via fax, your on-line or facsimile signature shall substitute for and have the same legal effects as an original form signature. Additionally, by signing this form, I am certifying that I qualify for the rate charged (i.e., if resident rate was charged, I am/my children are residents on the Niles Park District). If this is proven untrue, I realize that my park district privi	Name:						
In Person: Howard Leisure Center, 6676 W. Howard St. (M-F 8:30 am-5:00 pm) Email to: Robin at robin@niles-parks.org Call: 847-967-6633 Register Online: www-niles-parks.org WAIVER AND RELEASE OF ALL CLAIMS Please read this form carefully and be aware that in signing up and participating in this program you will be waving and releasing all claims for injuries you might sustain arising out of this program. Please read this form carefully and be aware that in signing up and participating in the above identified programs/activities, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might susta as a result of participating in any and all activities connected with and associated with said programs/activities (including transportation services/veh operation, when provided.) I recognize and acknowledge that there are certain risks of physical injury to participants in these programs/activities, and I voluntarily agree to assu the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of participating in all these programs/activities against the Niles Park District, including its officials, agents, volunteers and employees (here-in after collectively referred a "District"). I do hereby fully release and forever discharge the District from all claims for injuries, damages, or loss that my minor child/ward or I may have, or which may accrue to me or my minor child/ward and arising out of connected with, or in any way associated with these programs/activities. If registering on-line or via fax, your on-line or facsimile signature shall substitute for and have the same legal effects as an original form signature. Additionally, by signing this form, I am certifying that I qualify for the rate charged (i.e., if resident rate was charged, I am/my children are residents of the Niles Park District). If this is proven untrue, I realize that						FEE: Resident \$120, Non-Resident \$15	
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PLEASE PRINT Participant's Name	you will be wav Please read this assuming the ris as a result of pal operation, when I recognize and a the full risk of an these programs/ "District"). I do hereby fully which may accru If registering on- Additionally, by s the Niles Park D Photos are perio District use only	ing and releasing a form carefully and be k and legal liability a ricipating in any and provided.) acknowledge that the y and all injuries, dat activities against the release and foreverse to me or my minous line or via fax, your signing this form, I a sistrict). If this is providically taken of part and may be used in	all claims for the amount of t	r injuries you r t in signing up a and releasing all c connected with ain risks of physics, regardless of District, including the District from a and arising out of the signature that I qualify for realize that my class, during a s s publications.	might sustain arising out of and participating in the above I claims for injuries, damage in and associated with said prical injury to participants in the free severity, that my minor child go its officials, agents, volunterall claims for injuries, damage of connected with, or in any the shall substitute for and have the rate charged (i.e., if resipark district privileges may I special event or at the District	If this program. It identified programs/activities, you will be expressly is or loss which you or your minor child/ward might sustain rograms/activities (including transportation services/vehicle nese programs/activities, and I voluntarily agree to assume d/ward or I may sustain as a result of participating in all evers and employees (here-in after collectively referred as es, or loss that my minor child/ward or I may have, or way associated with these programs/activities. It is the thin the thin the test of the same legal effects as an original form signature, and the trate was charged, I am/my children are residents of the suspended or revoked. It is parks. Please be aware that these photos are for Parkets.	
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