

SPRING SOCCER

Niles Park District Co-Ed: Pre K-Grade 8

This program is designed to teach the game of soccer, promote social interaction, and team concepts. All participants will receive a jersey. Player must supply shin guards, and plastic cleats are optional. This league is for recreational players. Practice for Gr. 1-8 will be scheduled during the week by coach. Volunteer coaches needed. Location TBD.



April 20-June 20

Register By March 25:

Res \$115, Non-Res \$144

Tiny Tot: PreK-4 years

Time: 12:15-5:15 pm

Tot Soccer: Kindergarten

Time: 9:00 am-1:00 pm

Small Fry Soccer: Grade 1-2, beginner 3rd Gr.

Time: 9:00 am-1:00 pm

Big Shot Soccer: Grade 3-5

Time: Noon-5:00 pm

Junior Varsity Soccer: Grade 6-8

Time: 9:00 am-1:00 pm

REGISTER by filling out our Registration Form. Return to Robin at robin@niles-parks.org, or in person at the Howard Leisure Center, 6676 W. Howard Street.

QUESTIONS, call 847-967-1529.

Niles Park District SPRING SOCCER Registration Form

Primary Household Contact (First Name) _			(Last Name)			
Address				City/Zip		
Phone				Emergency Ph	none	
Email Address					_	
Do you need an Am	nericans with Disa	bilities Act	Accommodat	ion? Yes	Please circle the correct league (as of 2023-2024 school year)	
Player Name	Gender	Age	Grade	School	(45 6) 2020 202 1 55.11001 year,	
					Co-Ed Tiny Tots (Pre K-4 years) #220304-01	
COACH NAME: PHONE:					Co-Ed Tots (Kindergarten) #220304-02	
(Please indicate of you would like to be a volunteer coach) CARPOOL REQUESTS:					Boys Small Fry (1st & 2nd Grade, beginner 3rd Gr #220304-03	
					Girls Small Fry (1st & 2nd Grade, beginner 3rd Gr	
*Please list the names of the people you would like to be on the same team with. *We will do our best to accommodate request, but all may not be possible.					Co-Ed Big Shots (3rd, 4th, 5th Grade) #220304-05	
METHOD OF PAYM Cash Chec		1asterCard	Visa	Discover	Co-Ed JV (6th, 7th, 8th Grade) #220304-06	
Name:(As it appear			Exp.	Date:	FEE: Resident \$115, Non-Resident \$144	
Card #					TOTAL DUE: \$ Register by March 25.	
In Person: Ho Email to: Rob Register Onlin WAIVER AND you will be wav Please read this assuming the ris as a result of par operation, when I recognize and a the full risk of an these programs/ "District"). I do hereby fully which may accru	ward Leisure Cen in at robin@niles e: www-niles-par RELEASE OF ALL (ing and releasing a form carefully and b the common terms of the common term	cLAIMS Plead I claims for the audit claims for the	ase read this for injuries you ret in signing up a and releasing all sconnected with ain risks of physiss, regardless on District, including the District from a and arising out of	might sustain arising out and participating in the above I claims for injuries, damage and associated with said placed in injury to participants in a severity, that my minor characteristics, agents, voluntiall claims for injuries, dama of connected with, or in any	re that in signing up and participating in this program of this program. ve identified programs/activities, you will be expressly es or loss which you or your minor child/ward might sustain programs/activities (including transportation services/vehicle these programs/activities, and I voluntarily agree to assume hild/ward or I may sustain as a result of participating in all teers and employees (here-in after collectively referred as ges, or loss that my minor child/ward or I may have, or way associated with these programs/activities.	
Additionally, by s the Niles Park Di Photos are perio	signing this form, I a strict). If this is prov	m certifying t ven untrue, I icipants in a	that I qualify for realize that my class, during a	the rate charged (i.e., if respark district privileges may	ve the same legal effects as an original form signature. sident rate was charged, I am/my children are residents of be suspended or revoked. rict's parks. Please be aware that these photos are for Park	
I have read and	fully understand the	above impo	rtant, warning o	r risk, assumptions of risk a	and waiver and release of all claims.	
PLEASE PRINT	Participant's Nam	e				
Parent/Guardia	n Signature				Date	