

Dimple Dell Recreation

FALL Outdoor Soccer

4 yrs. - 6th Grade

COED Outdoor Recreational Soccer League

Where: Dimple Dell Fields - 10670 S 1000 E &
South Mountain Park - Draper Pool*

*South Mt.-Take 1300 East heading south. Turn right at the stop sign where 1300 East ends, onto Highland Drive. Travel approx. 2 miles to Vestry Rd. Turn left and the fields are past the outdoor pool on your left.

Fee: \$41*

Reduced rates available for children on "Child Nutrition Programs Income Eligibility Guidelines"

Fee: \$36 (If eligible for reduced meals)

Fee: \$31 (If eligible for free meals)

*Fee includes 8 games, uniform (socks, shorts & jersey), and participation award.

When: Participants will play twice each week, one weeknight and Saturdays for 4 weeks.

Tues: 1st/2nd Wed: Kindergarten & 3rd/4th Thurs: Pre-K & 5th/6th

Organizational Day: Saturday, September 12th

PK & K 3:00pm 1st/2nd 3:45pm 3rd/4th & 5th/6th 4:30pm

Times teams will meet on the organizational day. (Not game times)



Games begin the week of September 14th

PK, K & 1st/2nd Grade

6 on 6 (goalies for 1st/2nd Grade included)
Four 8 minute quarters

3rd/4th & 5th-6th

8 on 8 (goalies included)
Four 10 minute quarters



DIMPLE DELL FITNESS & RECREATION CENTER

Register at:

Dimple Dell

Fitness & Recreation Center

10670 South 1000 East (or)

Online at:

www.activityreg.com

Note: Players with requests or site selection is not possible through online registration.

For questions please call (801) 495-1480.

Registration Deadline:

August 20, 2009

Space is limited.

Program fills fast.

If you wait, you may miss out!

This league is volunteer coached!

Please sign up and coach a youth soccer team this fall!

OUTDOOR SOCCER REGISTRATION FORM

Check League & Field Location: All Leagues are COED

DIMPLE DELL FIELDS

- 4 Year old
- Kindergarten
- 1st & 2nd Grade
- 3rd & 4th Grade
- 5th & 6th Grade

SOUTH MOUNTAIN FIELDS

- 4 Year old
 - Kindergarten
 - 1st & 2nd Grade
- All 3rd - 6th grade games will be played at Dimple Dell.



Players wishing to be on the same team must have forms stapled together at time of registration.



**This program cannot run without volunteers! You don't have to be an expert to help kids have fun!*

** I'd love to be a coach!* Name _____ Phone _____

Name of Child _____ Boy _____ Girl _____

Birthday _____ School _____ Grade _____ Age _____

Address _____ City _____ State _____ Zip _____

Parent or Guardian _____ Home Phone _____ Work _____

Sign Up for Email Notifications: Receive updates on this youth soccer league and other upcoming soccer registrations. Email: _____ .com *(Please print clearly)*

In Emergency Notify (other than parent / guardian) _____ Phone: _____

Parental Statement of Agreement – Assumption of Risk, Liability Release and Refund Policy

1. **Release:** I hereby recognize and acknowledge that my child's participation in recreational activities may involve bodily injury and/or emotional injury to myself and/or my child. In consideration of my child being permitted to participate in such events, I for myself, my child, my heirs, my executors and administrators, hereby voluntarily and knowingly release, waive, and discharge Salt Lake County, its officers and employees from any and all liability except that caused solely by the negligence of Salt Lake County, that may result from my child's participation in Parks & Recreation activities. In addition, I agree that I or my insurance company will pay for medical, hospitalization or any other expenses resulting from my child's participation.
2. **Refund:** As per Salt Lake County policy and procedures, the Parks and Recreation Division may withhold 25% of the refund (program registration fee) for administrative costs. All refunds must be requested in person, accompanied with a written refund request. No refunds shall be given after the first day of the program.
3. **Collections:** I agree to pay Salt Lake County all costs incurred, together with reasonable attorney's fees in the event that my account is referred to the Salt Lake County Attorney's Office for collection. I understand that any account delinquent 30 days or more will be turned over to the Salt Lake Attorney for collection.
4. **Emergency Treatment:** I hereby authorize Salt Lake Parks and Recreation program staff to act on my behalf in accordance with their best judgement in case of an emergency involving my child, and agree to assume full responsibility for all expenses, medical or otherwise, that may arise therefrom. I understand that I or my insurance company will be billed for such emergency treatment.
5. **Equal Opportunity:** Salt Lake County Parks and Recreation provides equal opportunity to participate regardless of race, creed, gender, or ability to pay, and will upon request, provide reasonable accommodations to individuals with disabilities.
6. By signing this assumption of risk, liability release, and refund policy statement, I acknowledge that I have read its contents and disclosure, that I understand its contents and disclosure, and that I agree to its terms.

Signature (Parent or Legal Guardian): _____ Date _____

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| OFFICE USE ONLY...Receipt No. | Amt. | By. | Date |
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