



Fall Soccer



Who: Girls and boys in preschool through 6th grade

(children must be 3 years old at the time of registration)

What: Organization/Clinic Day, 7 games, full uniform and participation award.

Where: Elementary schools and parks in Herriman and Riverton

When: 2 games a week once during the week and once on Saturday.

Mondays: 3-4 year olds **Tuesdays:** 1st/2nd Grade and 5th/6th Grade

Wednesdays: 5yrs/Kinder and 3rd/4th Grade **Saturdays:** All divisions

Fee: \$46 (\$41+\$5 JSD field usage fee) (\$5 late fee after deadline)

Organization/Clinic Day is on Saturday, September 9th

Games Begin week of September 11th

REGISTRATION DEADLINE: AUGUST 28TH

Questions??? Contact Justine jbates@slco.org



7th-12th Grade Boys & Girls Travel League

Players will compete against other teams from other Rec centers. Games will be played on Saturdays and some weekdays. More info on Travel League Flyer.

Register In-Person

J.L. Sorenson Recreation Center
5350 W. Herriman Main St. (12900 S)

OR

Online

www.activityreg.com
> J.L. Sorenson



For inclusion opportunities for people with disabilities, contact Ashley at 385-468-1520 or ahaddow@slco.org.

FALL OUTDOOR SOCCER



Please Check Division (grade):

- 3-4 Year Olds
- 5 year olds and Kindergarteners
- 1st/2nd
- *3rd/4th Boys
- *3rd/4th Girls
- *5th/6th Boys
- *5th/6th Girls

*If there are not enough kids to separate boys from girls, ALL leagues will be co-ed!

7th - 12th—This league will be a travel league with other recreation centers in the south-west part of the valley.

Please provide most current e-mail address. E-mails will be the primary source of communication.

I would like to play with: _____

who attends (school) _____

We will do our best to honor these requests, but there are no guarantees.

If you are requesting to be with four or more kids, you must provide a volunteer coach for your team.

I WOULD LIKE TO BE A VOLUNTEER COACH

Coaches' Name: _____

Phone: _____

Name of Participant _____ Birthday ____/____/____ Boy ____ Girl ____

Address _____ City _____ State _____ Zip _____

Grade _____ School _____ Name of Parent or Guardian _____

E-mail _____ Home Phone _____ Other Phone _____



Check here to be contacted about inclusion opportunities for people with disabilities.

Youth Sports Registration Statement

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

Assumption of Risk: I hereby acknowledge and agree that my child's participation in recreational activities involves inherent foreseeable and unforeseeable risks and hazards which may expose my child, or me, to illness, injury, or death. In consideration of my child's participation in such activities, I for myself, my child, my heirs, my executors and administrators, freely and voluntarily agree to assume and accept any and all risks to my child or myself associated with my child's participation in Salt Lake County recreational activities.

Release: In consideration of my child's participation in the Salt Lake County recreational activities, I, for myself, my child, my heirs, my executors and administrators hereby release Salt Lake County and its officers, agents, and employees from any cause of action, claim, or demand of any nature whatsoever I or my child may now have, or have in the future, against Salt Lake County on account of personal injury, property damage, death, or accident of any kind, caused by, arising out of, or in any way related to my child's participation in Salt Lake County recreational activities.

Indemnification: In consideration of my child's participation in the Salt Lake County recreational activities, I agree to indemnify and hold harmless County, its officers, agents, and employees from any and all causes of action, claims, demands, losses, or costs of any nature whatever cause by, arising out of, or in any way related to my child's participation in the Salt Lake County recreational activities. I agree that my duty to defend and indemnify the County under this Agreement includes all attorney fees, litigation and court costs, expert witness fees, and any sums expended by or assessed against the County for the defense of any claim or to satisfy any settlement, arbitration award, or verdict paid or incurred on behalf of the County arising out of or in any way related to my child's participation in the Salt Lake County recreational activities.

Refund: Refunds may only be requested in person and must be accompanied by a written request. 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. No refunds shall be given after the first day of the program.

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 for collection. I understand that any account delinquent 30 days or more will be turned over to collection.

Emergency Treatment: I hereby authorize Salt Lake Parks and Recreation program staff to act on my behalf in accordance with their best judgment in case of an emergency involving my child, and agree to assume full responsibility for all expenses, medical or otherwise, that may arise therefrom.

Media Consent: I hear by grant permission to Salt Lake County to use my or my children's photograph, videotaped image, quotes/comments, or name for publicity and educational purposes in any and all publications and media without limit or compensation.

Name Posting: Unless otherwise indicated below, Salt Lake County is authorized to post or publish the name of my child participating in Salt Lake County recreational activities on the Salt Lake County website.

I do not authorize Salt Lake County to post or publish the name of my child participating in Salt Lake County recreational activities on the Salt Lake County website.

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. If any portion of this Agreement is held to be invalid by a court of law, then it is agreed and intended that all the remainder shall, notwithstanding, continue in full force and effect.

Name of Child Participant: _____ Signature (Parent or Legal Guardian): _____ Date _____

OFFICE USE ONLY...Receipt No.

Amt.

By.

Date