



2017 WINTER INDOOR SOCCER

For 3 year olds to 2nd graders

Who: Boys & Girls ages 3 - 2nd grade
Must be 3 by 02/25/17 (no exceptions).

What: Coed Indoor Recreational Soccer

When: All participants play on Saturdays for 4 weeks.
Games begin Saturday, March 4, 2017

Where: All Games at Dimple Dell Recreation Center
10670 South 1000 East, Sandy 84094

Fee: **Early-Bird Registration: \$21**
\$26 after Friday, February 17, 2017
Includes 4 games & a participation award
(Jersey not included). See adjacent box.

Games: First 10 minutes of each game will be
designated for team practice; this will be the only
practice time available to each team.

Teams: Rosters will consist of 10-12 players maximum.
PK and Kinder will play 6 vs. 6, no goalie.
1st/2nd will play 6 vs. 6, including goalie.

Uniform: We will be using the same
reversible (red/blue) jersey as all other Dimple
Dell Sports. If you have one, great! You
will not need an additional jersey. If you do
not have one of the red/blue Sport-Tek sepa-
rates, you will need to purchase one at Dim-
ple Dell. Once you have the red/blue jersey,
it can be re-used for any future sport at Dim-
ple Dell (except Jr. Jazz/baseball).

Reversible Jersey - \$9
Red/Blue Sport-Tek Jerseys - \$12

Participants are able to wear any kind of
shorts or socks. All participants must wear
either the reversible red/blue jersey or the
red/blue separates.

Organization Day:

Saturday, February 25, 2017.

Pre-K (PK01-PK05): 11:00 am

Pre-K (PK06-PK10): 12:30 pm

Kindergarten: 2:00 pm

1st/2nd Grade: 3:30 pm

Registration Deadline: February 17, 2017

Pre-K Division

Four 6 minute quarters.
Game times will be
mid-morning.

Kinder Division

Four 8 minute quarters.
Game times will be
early afternoon.

1st/2nd Division

Four 8 minute quarters.
Game times will be
afternoon - early evening.

Discounted rates
available if you pre-
sent your school
lunch eligibility let-
ter and/or if you
meet other qualifying
criteria.

For information on 3/4 grade indoor soccer
contact Copperview Recreation Center at
(385) 468-1515 or, check out their website at
www.recreation.slco.org/copperview

Register at Dimple Dell:
10670 S. 1000 E.

Or online @ www.slco.org/dimple-dell
Questions or concerns, please contact Lesley:
lashaw@slco.org or 385-468-3355



2016 Winter INDOOR SOCCER

Ever considered being a coach??
Make a difference!

We need volunteer coaches!

I would like to volunteer as:

Head Coach Asst. Coach

Name: _____

Phone: _____

Email: _____

Check appropriate league (grade):

- PK (3 & 4 yr olds.—Must be 3 by 02/25/17
- Kinder - (5 & 6 yr olds) If your child is already in 1st grade, please register them for the 1st/2nd division.
- 1st/2nd Grade

I request to play with: (If you would like siblings or friends to play together, but they are different ages, you must sign them up for the higher division)

Name of Player _____ Boy _____ Girl _____

Birthday _____ Age _____ Grade _____ School _____

Address _____ City _____ State _____ Zip _____

Email _____ ** Important form of contact - Please fill this out!

Parent or Guardian _____ Home Phone _____ Work _____

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



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

Parental State-

ment of Agree-

ment – Assumption of Risk, Liability Release and Refund Policy

- 1) **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.
- 2) **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.
- 3) **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.
- 4) **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.
- 5) **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.
- 6) **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.
- 7) **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.
- 8) **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 #:

Amt.:

Date:

By: