



Fall Outdoor Soccer 2017



Who: All genders ages 3 years - 4th grade
Must be 3 by 09/09/2017

What: Outdoor Recreational Soccer

When: Participants play twice each week, one week night and Saturdays for a total of 8 games.
See complete flyer for further details.

Where: Dimple Dell Fields: 10670 S. 1000 E.

Games begin September 12, 13, 14, 2017

Fee: **Early-Bird Registration \$36**
\$41 after Friday, September 1, 2017
(Org. Day, 8 games and participation award)

Uniform: We will be using the reversible jerseys. If you do not have a reversible jersey or the red/blue separates, you will need to purchase one at Dimple Dell. These jerseys are reusable in many other programs at Dimple Dell and will reduce future registration fees! **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. Shin guards are recommended but not required (must be provided by participant).

Organization Day:
Saturday, September 9, 2017
@ Dimple Dell Fields
Please plan on attending to meet your team and have practice!
Pre-K Division: 10:00 AM
Kindergarten Division: 11:30 AM
1st/2nd Division: 1:00 PM
3rd/4th Division: 2:30 PM
5th/6th Division: 4:00 PM

All schedules will be posted @
www.quickscores.com/dimpledell

Pre-K Division
3 & 4 year olds
Play Thur. @ 5:30p or 6:30p & Sat. AM
11 per roster - 6 vs 6 - No Goalies
(4) 8 minute quarters

Kinder Division
Kinder & 5 year olds
Play Wed. @ 5:30p or 6:30p, & Sat. AM
11 per roster - 6 vs 6 - No Goalies
(4) 8 minute quarters

1st/2nd Division
Play Tue. @ 5:30p or 6:30p & Sat. Mid-Morning/Early Afternoon
13 per roster - 8 vs 8 - Goalie included
(4) 8 minute quarters

3rd/4th Division
Play Wed. @ 5:30p or 6:30p & Sat. Early Afternoon
13 max per roster - 8 vs 8 - Goalie included
(2) 20 minute halves

5th/6th Division
Play Tues. @ 5:00p, 6:00p, or 7:00p & Sat. Afternoon
13 per roster - 8 vs 8 - Goalie Included - (2) 20 min. halves
Up to 2 games may be played at Copperview Rec. Center.
8446 S. Harrison St. (300 W.)

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



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

OUTDOOR SOCCER REGISTRATION FORM

CIRCLE DESIRED LEAGUE - ALL GENDER LEAGUES

Pre-Kinder (3 and 4 yrs.)
Kindergarten (5 yrs. & Kinder)
1st & 2nd Grade
3rd & 4th Grade
5th & 6th Grade

I request to play with:

If you request 4 or more players, you must provide your own coach!

WE NEED COACHES!

I would like to volunteer as:

Head Coach

Asst. Coach

Name: _____

Cell Phone: _____ Email: _____

If you would like to coach, please leave a valid email address so we can email you information.

Name of Child _____ Boy _____ Girl _____

Birthday _____ School _____ Grade _____ Age _____

Address _____ City _____ State _____ Zip _____

Parent or Guardian _____ Home Phone _____ Cell _____

Email: _____ .com (Please print clearly)



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 there from.

Media Consent: I hereby 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.

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: