WHERE: Holladay Lion’s Rec Center - 1661 E Murray Holladay Rd, Holladay, UT 84117
PRICE: $45 - Financial assistance available for qualified patrons. Must pay at HLRC front desk.
INCLUDES: Jersey, shorts, socks, soccer ball, & six 45-minute sessions with clinics/scrimmages

Description: This program is designed to teach participants the basics of soccer so they understand rules, proper techniques and basic skill development in a fun environment. All participants will be divided into teams at the beginning of the season. **Staff will be on every field to teach basic skills and drills each week.** Each level has been thoughtfully created and catered to basic learning abilities of each age group. If you feel your child is more advanced than their general age group, you may register up a level. If you are uncertain, register them in their current age group.

3-YEAR-OLDS: (Based on age on Sept. 1, 2019) (Must be 3 by Sept. 1, 2019) This is a parent/child program. Parents should attend each week to partner with their child for basic drills, skills and games. Clinic will be 30 minutes followed by 2 six minute halves each week. 3-year-olds often struggle with the concept of organized team sports, so this will teach them the basics in a social setting.

4-5-YEAR-OLDS: (Not in kindergarten yet) This program will be half clinic and half scrimmage each week. Expect a 22 minute clinic followed by four 4 minute quarters with a 2 minute break between quarters.

KINDER: (Kindergarten Fall 2019) This program will start with a 15 minute clinic followed by a complete game of four 6 minute quarters. Skills and drills will focus on basics plus an introduction to defense and throw-ins.

Dates & Times: All sessions will be played on Saturdays: Sept. 7, 14, 21, 28, Oct. 5, 12
Your team will be scheduled for a 1 hour timeslot each week. Times will vary from week to week between the hours of 9am and 3pm.

Any Questions: email TANDY THACKERAY tthackeray@slco.org

REGISTRATION: Registration deadline is Aug. 26, 2019
$5 Late fee added after registration

**To register in-person:**
1661 E Murray Holladay Rd,
Holladay, UT 84117

**To register ONLINE:**
www.activityreg.com

Space is limited, roster spots available on a first-come, first-served basis.
REGISTRATION FORM
Hollay Lion's - Fall Rookie League Soccer 2019

We need VOLUNTEER PARENTS to help with team organization & snacks.
Staff will be on your field each week to help with skills & drills.

Name: ___________________________ Phone: ___________________________
Email: __________________________

LEAGUE DIVISION: (Based on age on September 1, 2019)
☐ Age 3 - Parent/Child Program
☐ Age 4-5 - Not in Kindergarten yet
☐ Kinder - Currently in Kindergarten

Name of Participant ______________________
Birthday ___________________________ Age ________ Girl ☐ Boy ☐

Address ___________________________ City ___________________________ State ________ ZIP ________
School Attending ________________________ Grade ________

Parent or Guardian ________________________ Home ________________ Cell ________________

Parent or Guardian Email ____________________________

Emergency Contact (other than guardian) ____________________________ Phone ____________________________

NOTES:
Teammate* / ____________________________

Please make sure the teammate you are requesting is also REGISTERED* If 3 or more children request to be on the same team, a volunteer parent must be provided.

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

PARENTAL CODE OF ETHICS

As A Parent I Will: Remember that the game is for the players and not for the parents. Do my very best to make this sport FUN for my child. Place the emotional and physical well being of my child ahead of any personal desire to win. Demonstrate GOOD SPORTSMANSHIP by giving POSITIVE SUPPORT and ENCOURAGEMENT to all players, coaches, officials, and recreation staff at every practice and game. Support the coaches, officials, and recreational staff with respect regardless of race, sex, creed, or ability. I will expect my child to do likewise.

Consequence for Breaking Code of Conduct: First offense you will be given a card from site supervisor and/or a verbal warning. Second offense you will be removed from the game/practice and be suspended from attending the next game/practice. Third offense you will be suspended from attending the remainder of your child’s games/practice.

Signature of Parent/Guardian: ____________________________ Date ____________________________

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 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 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.

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. ______

Name of Child Participant: ____________________________________________

Signature (Parent or Legal Guardian): ____________________________ Date: ____________________________

OFFICE USE ONLY: Till # Amount By Date