WHERE:  HOLLADAY LION’S RECREATION CENTER - 1661 E Murray Holladay Rd.

PRICE:  $40 - Financial assistance available for qualified participants - contact front desk for info.

INCLUDES:  Jersey, shorts, socks, & 7 games

1st/2nd Grade Division:
COED Division
Dates: Sept. 7, 14, 21, 28, Oct. 5, 12

3rd/4th Grade Division:
COED Division
Tuesdays - Millcreek Activities Center - (4405 S 1025 E)
Dates: 7 (Saturday), 10, 17, 24, Oct. 1, 8, 15

5th/6th Grade Division:
COED Division
Tuesdays - Millcreek Activities Center - (4405 S 1025 E)
Dates: 7 (Saturday), 10, 17, 24, Oct. 1, 8, 15

DESCRIPTION: The first 15 minutes of each game time will be set aside for team practice and warm up. Teams may choose to organize their own additional practices, but that will be up to each coach and team to decide on a location and time. Additional practices are not included. Games will consist of two 20 minute halves. We typically play 8 vs 8, including the goalie.

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

Register In Person:
1661 E Murray Holladay Rd,
Holladay, UT 84117
(385)-468-1700

For more information or to Register online:
https://slco.org/holladay-lions/youth-sports/Soccer/

Schedules will be posted online: September 2
www.quickscores.com/holladay-lions

Questions??

Please contact:
tthackeray@slco.org

For inclusion opportunities for people with disabilities,
contact Kristen Sprool ksproul@slco.org / 385-468-1521
REGISTRATION FORM
Holladay Lion's - Fall Soccer 2019

WE NEED COACHES!
I would like to volunteer as a coach!
Coach Name: ____________________________
Phone: ____________________________
Email: ____________________________

DIVISION: Based on Grade Fall 2019
☐ 1st/2nd Grade - Saturdays
☐ 3rd/4th Grade - Tuesdays
☐ 5th/6th Grade - Thursdays

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*/Coach Request ____________________________

*If 3 or more children request to be on the same team, a coach must be provided. *If registering late and requesting a player, a coach 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 20% of the refund (program registration fee) for administrative costs. No refunds shall be given after the first day of the program. I authorize 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. ______

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: Till # Amount By Date