KIDZ LOVE SOCCER IN SNOQUALMIE FALL '12 REGISTRATION FORM

Player's First Name: _____ Date of Birth: _____
Player's Last Name: _____ Parent/Guardian Name:_____
Address: _____ Apt #: _____
City/State/Zip: _____
Phone #1 _____ Phone #2 _____
Email address: _____

Hold Harmless

I assume all risks and hazards of my child participating in your soccer programs and release from responsibility any persons providing transportation to and from activities. In cases of injury, I do herby waive all claims and legal actions, financial or otherwise, against the City of Snoqualmie, its elected officials and employees, the organizers, supervisor, coach or any volunteer connected with the program. In absence of my signature, payment of fees and participation in the program shall constitute acceptance of the conditions set forth in this release. I also grant full permission to use any photographs, videotapes, motion pictures, recordings or any other record of this program for promotional and documentary purposes.

I have read and understand the above and "Hold Harmless" waiver and agree to hold City of Snoqualmie and Kidz Love Soccer harmless from and against any and all liability described above. ____Initial

Signature: _____ Date: _____

Thursday **Dates: 9/13/12 – 11/8/12** **9 weeks** **Fee: $83**

Azalea Park – 6604 Azalea Way, Snoqualmie WA 98065

__Tot Soccer	(3.5-4yrs.)	3:00-3:30pm
__Pre Soccer	(4-5yrs.)	3:30-4:05pm
__Soccer 1	(5-6yrs.)	4:05-4:50pm

Thursday **Dates: 9/13/12 – 10/25/12** **7 weeks** **Fee: $66**

Azalea Park – 6604 Azalea Way, Snoqualmie WA 98065

__Soccer 2/3	(7-12yrs.)	4:50-5:35pm
__Mommy/Daddy & Me	(2-3.5yrs.)	5:45-6:15pm

To register:

Please fill out this registration form and return if to City of Snoqualmie Parks and Recreation Department, P.O. Box 987, Snoqualmie WA 98065 with payment, we accept checks and cash. You may also come in to our office located at 38194 SE Stearns Street, Snoqualmie WA 98065

***Note: Shin Guards are required.**