

ORGHA Co-Ed Soccer Clinic for Ages 4-7

When: Saturdays 9 – 10 am from May 6 to June 17, 2017 (excluding May 27, Memorial Day weekend)

Where: Soccer fields located at Kleinert Park (southwest corner of Cranston & Orangelawn)

Who: Boys and girls, ages 4-7

Cost: \$25.00 per player (please make all checks payable to ORGHA)

How to Register: Please bring this completed registration form and payment to either sign-up event below.

- 1) March 25, 2017 at 11035 Berwick from 9:00-10:00 a.m.
- 2) April 15, 2017 at 11035 Berwick from 9:00-10:00 a.m.

Welcome to another fun-filled ORGHA soccer clinic! There are 24 openings (2 teams) for the 4-5 year old division and 24 openings (2 teams) for the 6-7 year old division. The cost per player will be used to provide a soccer T-shirt, snack each week and a pizza party on the last Saturday. To continue making this clinic a success, please consider volunteering for one of the tasks below. All volunteers will be contacted prior to the first day of soccer.

Participants need to bring their own shin guards, soccer ball and water bottle (participants must wear shin guards during the clinic). Children ages 4-5 should have a size 3 soccer ball and children ages 6-7 should have a size 4 soccer ball. Please fill out the registration form and sign the waiver below. If you have any questions, please contact John Stimac at orghasoccer@gmail.com.

Participant's Name _____ D.O.B. _____ Age as of 4/30/17 _____

Address _____ Phone Number _____

Email _____

Legal Guardian Name (Must remain at field during clinic) _____

VOLUNTEERS NEEDED: I can help with the following (please check the tasks you are interested in):

- | | |
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| <input type="checkbox"/> Grass cutting | <input type="checkbox"/> Soccer field set-up on Saturdays (goals and cones) |
| <input type="checkbox"/> Painting lines on the field (paint & equipment provided) | <input type="checkbox"/> Name tags (printing and distributing each Saturday) |
| <input type="checkbox"/> Coach | |

RELEASE AND WAIVER OF CLAIMS

As legal guardian of the participant, I understand that soccer can be a dangerous sport. I hereby release and absolve the organizers of this clinic, Old Rosedale Gardens Homeowners Association, and any and all of its agents and/or employees with respect to any injury the participant may receive as a result of their participation in the ORGHA Soccer Clinic and from any and all other potential claims or causes of action in any way relating to the soccer clinic. I assume the responsibility and risk of injury resulting therefrom due to the negligence of any person or party referred to in this Release. No oral representations, statements or inducements contrary to the terms of this document have been made to me. I agree not to hold the organizers of this clinic or Old Rosedale Gardens Homeowners Association liable for any accident or injury that may result by participation in this soccer clinic.

Signed _____ Date _____