



# 2020 INDOOR SOCCER SATURDAY LEAGUE @ Woodlands

**WITH HURON HIGH SCHOOL  
COACHES & PLAYERS !**

**Saturdays, Jan. 18 - March 7, 2020**  
**Program Fee: \$75**

- **Grades 1 - 2** — Noon - 1:00 pm on Saturdays
- **Grades 3 - 4** — 1:15 - 2:30 pm on Saturdays
- **Grades 5 - 7** — 2:45 - 4:00 pm on Saturdays

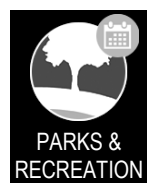
**A great opportunity for boys and girls in grades 1 - 7 to work with the  
Huron High School Soccer Coaches and Players  
to improve skills and HAVE FUN!**

Each week will include skill sessions and drills — plus games!  
Participants should wear shin guards and gym shoes; please bring water bottle.  
Program held on Saturdays at Woodlands School gymnasium.

**This is a growing program with limited spaces—sign up early!**

**FOLLOW HURON PARKS &  
RECREATION ON FACEBOOK**  
for weather-related schedule  
changes/cancellation

**QUICK & EASY  
ONLINE REGISTRATION**  
at [cityofhuron.org](http://cityofhuron.org) (click on Parks & Recreation)



Or complete paper form (OVER) and mail with payment to Huron Parks & Recreation,  
417 Main St., Huron, OH 44839 ... or drop-off at 110 Wall St., Huron.  
Credit Card payments also accepted at our office.

**See other side for Registration form—or Register ONLINE at [cityofhuron.org](http://cityofhuron.org)**

**HURON PARKS & RECREATION**

**Mail** 417 Main St., Huron, OH 44839 • **Office** 110 Wall St. Huron, OH

**Phone** 419-433-8487 • **Fax** 419-433-0470 • **Email** [hprd@cityofhuron.org](mailto:hprd@cityofhuron.org) • **www.cityofhuron.org**





# 2020 INDOOR SOCCER SATURDAY LEAGUE @ Woodlands

With Huron High School Coaches & Players!

REGISTRATION FORM...or Register ONLINE at [cityofhuron.org](http://cityofhuron.org)



**CHECK AGE GROUP:**

☐

**Grades 1 - 2** — Noon - 1:00 pm on Saturdays

☐

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☐

**Grades 5 - 7** — 2:45 - 4:00 pm on Saturdays

**Saturdays at Woodlands School • Jan. 18 - March 7, 2020 • Program Fee \$75**

(PLEASE PRINT)

Child's Name (FIRST & LAST) : \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Child's Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent/Guardian Name (FIRST & LAST) : \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone (Home): \_\_\_\_\_ (Cell): \_\_\_\_\_

Email address (*please print clearly*): \_\_\_\_\_

**SAVE TIME—skip the  
paper form ...  
REGISTER ONLINE  
[cityofhuron.org](http://cityofhuron.org)**

***Alternative Emergency Contact, if we are unable to reach you:***

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Relationship to child: \_\_\_\_\_ Phone: \_\_\_\_\_

***Child's special needs, allergies, medical notes, other:*** \_\_\_\_\_

**REFUND POLICY:**

- Full refunds will be issued for any program cancelled by Huron P&R.
- Participants may request refunds for programs up to 5 business day prior to the beginning of the program.
- Refunds received with less than 5 business days notice will only be issued for a medical problem when accompanied by a doctor's excuse.
- A \$5.00 administration fee is deducted from all refunds; except when cancelled by the department.
- Complete refund policy is available on our website.

**WAIVER FOR PARTICIPATION:**

I recognize and acknowledge that there are certain risks of physical injury to participants in the above program(s) and I agree to assume the full risk of any such injuries, damages or loss regardless of severity, which I or my child/ward may sustain as a result of participating in any activities connected or associated with any such program (s). I waive and relinquish all claims I or my child /ward may have against the City of Huron and its officers, agents, servants and employees as a result of participating in any of the above program(s). I hereby fully release and discharge the City of Huron and its officers, agents, servants and employees, from any and all claims from injuries, damages or loss which I or my child/ward may have or which may accrue to me or my child/ward on account of my participation or the participation of my child/ward in any of the above program(s). I further agree to indemnify and hold harmless and defend the City of Huron and its officers, agents, servants and employees from any and all claims resulting from injuries, damages, losses sustained by me or my child/ward, and arising out, connected with, or in any way associated with the activities of any of the program(s). I have read and fully understand the above program details and waiver and release of claims. I understand and agree with all refund policies set forth by the Parks and Recreation Department. I also understand that I may forfeit a portion or all of any registration fee according to these policies.

I understand that my child or I may be photographed or videotaped while participating in the above program(s). I give permission for photos and videotapes of my child or me to be used to promote the City of Huron and its Parks and Recreation Department and such photos and video will be the property of the City of Huron. In the event of an emergency requiring medical treatment, I give my permission to the program instructor, coach, and/or league director to obtain medical treatment they feel is necessary and to call the local EMS if necessary. I understand that no medical or accidental insurance will be provided to participants.

**Parent/Guardian Signature (required)** \_\_\_\_\_ **Date:** \_\_\_\_\_

By signing registration, you agree to Refund Policy and Participation Waiver.

**Return completed form with payment to HURON PARKS & RECREATION**

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