



KENSTON COMMUNITY EDUCATION SPRING SOCCER 2017



Enrollment limited to Kenston School District Residents

Games typically will be played on Saturdays – No games/practices over Spring Break

<p>CHOOSE ONE: (Grade School Year 2016-17) #2005.s17</p> <p><input type="checkbox"/> A) PreK-K Coed <input type="checkbox"/> B) 1-2 Grade Boys <input type="checkbox"/> C) 1-2 Grade Girls <input type="checkbox"/> D) 3-5 Grade Boys <input type="checkbox"/> E) 3-5 Grade Girls</p> <p>Register online at www.kenstoncommunityed.org</p>	<p style="text-align: center;">REGISTRATION FEE:</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-bottom: 10px;"> <tr> <td style="text-align: center;">Fee until 3/1/17:</td> <td style="text-align: center;">\$ 75</td> </tr> <tr> <td style="text-align: center;">Late Fee after 3/1/17: <i>No registrations will be accepted after the first scrimmage.</i></td> <td style="text-align: center;">\$ 90</td> </tr> </table> <p>All-league practices will begin in Mar 25. See KCE sports page for schedule. www.kenstoncommunityed.org</p>	Fee until 3/1/17:	\$ 75	Late Fee after 3/1/17: <i>No registrations will be accepted after the first scrimmage.</i>	\$ 90	<p>Volunteer Coaches Needed!!!</p> <p>*New* KCE is streamlining the coach sign-up process. If you can be a head coach or an assistant coach, please visit the KCE sports page to register!</p> <p style="text-align: center;">www.kenstoncommunityed.org</p>
Fee until 3/1/17:	\$ 75					
Late Fee after 3/1/17: <i>No registrations will be accepted after the first scrimmage.</i>	\$ 90					

Player Name _____ Phone _____

Address _____ City _____ Zip _____

Age _____ Grade _____ Birth Date ____ / ____ / ____ Height _____

Ability: Beginner Average Above Average **Do you still have your jersey from last season? Y/N** _____ (\$10 to replace)

Name of Father: _____ Cell Phone _____ Home Phone _____

Name of Mother: _____ Cell Phone _____ Home Phone _____

Primary Contact: Father Mother Other _____

E-mail addresses _____

Emergency Contact _____ Phone _____

Physical Restrictions/Allergies _____

Release of Liability Medical Treatment Consent

In consideration of the Auburn Bainbridge Recreation Board (AKA: Kenston Community Education; KCE) providing sponsorship and/or providing facilities for this program and/or Kenston Board of Education ("Board") providing facilities, I hereby release and hold harmless and agree to indemnify KCE and/or the Board and their employees, agents, and representatives from any and all claims, costs, damages, and liabilities for injuries or property damage sustained or caused by me or my ward while participating in any program offered by KCE. I understand that fees do not include accident or personal property insurance. I further represent that I am, or my child or ward is, physically capable of participating in the program based upon consultation with my, or my child's or ward's, personal physician.

Further, in the event of any injury, I hereby give my permission and consent and authorize emergency first aid and/or medical and/or hospital care or treatment for myself and/or my child/ward if deemed necessary by qualified medical or emergency personnel or by said employees, agents or representatives of KCE, and further agree to assume all expenses for said treatment.

Participant Name: _____ DOB: _____

Address: _____

Street City Zip

Phone #: _____

Signature of Participant or Minor's Parent/Legal Guardian _____

Date _____

SPONSORS

For your \$250 donation, you will receive your company name/logo on the right front panel on shorts for your team. Other sponsorship packages are also available. Contact Sue at the Kenston Community Education office at 440-543-2552 for more information or: **I am interested!**

Sponsor Name: _____ **I can be reached at:** _____

Company Name: _____ **Email:** _____