



# KENSTON COMMUNITY EDUCATION CO-ED SPRING SOCCER 2012



Enrollment limited to Kenston School District Residents

Games played on Saturdays March 24<sup>th</sup> – May 12<sup>th</sup> breaking for spring break

<p><b>CHOOSE ONE:</b> (Grade School Year '11-'12)</p> <p><input type="checkbox"/> PreK-K    A</p> <p><input type="checkbox"/> 1-2 Grade    B</p> <p><input type="checkbox"/> 3-4 Grade    C</p> <p>due to # of players grade levels may change</p> <p>Register online at <a href="http://www.kenstoncommunityed.org">www.kenstoncommunityed.org</a> course # 2005</p> <p style="text-align: center;"><b>Schedules are set to accommodate KCE volleyball players</b></p>	<p style="text-align: center;"><b>REGISTRATION FEE:</b></p> <table border="1" style="width: 100%; border-collapse: collapse; margin-bottom: 10px;"> <tr> <td style="text-align: center;"><b>Early Fee until 2/17/2012</b></td> <td style="text-align: center;"><b>\$75</b></td> </tr> <tr> <td style="text-align: center;"><b>Fee 2/18-3/9</b></td> <td style="text-align: center;"><b>\$85</b></td> </tr> <tr> <td style="text-align: center;"><b>Late Fee 3/10 &amp; later</b> <small>Registrations received after 4/17 will be placed on a waiting list</small></td> <td style="text-align: center;"><b>\$100</b></td> </tr> </table> <p style="text-align: center; font-size: small;">Make checks payable to: Kenston Community Education 17425 Snyder Road · Chagrin Falls, Ohio 44023</p>	<b>Early Fee until 2/17/2012</b>	<b>\$75</b>	<b>Fee 2/18-3/9</b>	<b>\$85</b>	<b>Late Fee 3/10 &amp; later</b> <small>Registrations received after 4/17 will be placed on a waiting list</small>	<b>\$100</b>	<p><b>VOLUNTEERS NEEDED:</b></p> <p><input type="checkbox"/> I would like to be a head coach.</p> <p>Name _____</p> <p>E-mail _____</p>
<b>Early Fee until 2/17/2012</b>	<b>\$75</b>							
<b>Fee 2/18-3/9</b>	<b>\$85</b>							
<b>Late Fee 3/10 &amp; later</b> <small>Registrations received after 4/17 will be placed on a waiting list</small>	<b>\$100</b>							

Participant Name \_\_\_\_\_ Phone \_\_\_\_\_

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

Age \_\_\_\_\_ Grade \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Ability:  Beginner     Average     Above Average

Name of Father: \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Name of Mother: \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Primary Contact:     Father     Mother     Other \_\_\_\_\_

Primary Contact E-mail address \_\_\_\_\_ @ \_\_\_\_\_

Medical Insurance Company \_\_\_\_\_ Policy # \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

(Other than parent/guardian)

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: \_\_\_\_\_

Signature of Parent/Legal Guardian \_\_\_\_\_ Date: \_\_\_\_\_

### SPONSORS

For your donation of \$150 you will receive your company name on the back of your child's teams shirt as well as a link on our website Contact the Kenston Community Education office at 440-543-2552

**I am interested!**

**Please contact me at: Name:** \_\_\_\_\_ **I can be reached at:** \_\_\_\_\_