2014 INDOOR SOCCER (FUTSAL) REGISTRATION

Mail or hand-deliver to: Youth Sports, Holcom Park Recreation Center, 2700 W. 27th St., Lawrence, KS 66047 \$15 LATE FEE AFTER JAN. 2

Participation Fees	
K-4th grade	\$40
Jhawk 5th & 6th grade	\$50

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Player's Name (one child per form): Last	First		Phone:	Phone:	
Address:				Birth Date:	
Street	City	State	ZIP		
Current Grade: [☐ Male ☐ Female	E-mail:	 		
School Attending (if private or homeschooled, please note which dis	trict #497 school child wo	ould attend):			
Name ONE friend you would like to be placed on a team with: Last	Fii	rst	School:		
We will do our best to place your son/daughter on a team with the CLAS. Some schools may not have all their classmates on the same team.	SMATE OR FRIEND liste	d above (friend must b	e registered by the	e deadline).	
Participant's Parents' Names: Father: I consent to my child's participation in the Lawrence Parks and Recreation-sponsored Youth and will follow all Lawrence Parks and Recreation rules and regulations. I also consent to the	Sports Program. I recognize ther	Mother: re may be potential hazards in	n this activity. He/She is	s in good physical condition	
Participant or Guardian Signature:		•		Date:	
Check league that applies:	\$15 late fee after Jan. 2				
a) Intro (K, kindergarten boys) b) Intro (Kg, kindergarten girls) c) Rk1 (1st grade boys) d) Rk2 (2nd grade boys) e) Rkg (1st & 2nd grade girls) f) Rec3 (3rd grade boys)		th grade girls)	_ j) JH6 (6th grade _ k) JHG (5th & 6th	* *	
Parent Volunteer Coaches Needed! I wish to be considered as a head coach for my son's/daughter's soccer tear	n: (Deduct \$10 if you sign	n up PRIOR to deadline)	_	FFICE ONLY: ode#: 124100	
Please note: Not ALL who sign up to coach will be given a team. There may be several pe	ople who are assigned to one te	am as co-coaches.	Cash	Check #	
Name:		School:	Amt \$	Date	
Address (if different from above):					
E-mail:					
I coached last year: Home Phone:				Team #:	
				10dili #	
2014 BASEBALL/SOFTBALL Mail or hand-deliver to: Youth Sports, Holcom Park Recreation C \$15 LATE FEE AFTER AF Player's Name (one child per form):	enter, 2700 W. 27th St., PRIL 9		RKSB Rec BB	\$40 Rec SB \$45 \$40 JHSB \$50 \$40 JH4 \$55 \$45 JHBB \$55	
Last	First				
Address:	City	State	ZIP	Birth Date:	
	•				
Current Grade (as of May 1, 2014):		E-mail:			
School Attending (if private or homeschooled, please note which dis	trict #497 school child wo	ould attend):			
Name ONE friend you would like to be placed on a team with: Last	Fir	rst	Scho	ool:	
We will do our best to place your son/daughter on a team with the <i>CLAS</i> . We form our teams primarily by the school each participant attends. Som					
Participant's Parents' Names: Father: I consent to my child's participation in the Lawrence Parks and Recreation-sponsored Youth and will follow all Lawrence Parks and Recreation rules and regulations. I also consent to the			n this activity. He/She is		
Participant or Guardian Signature:			_	Date:	
Check league that applies:	\$15 late fee after April 9				
a) Intro (K, boys, t-ball) d) RK Baseball (2nd grad b) Intro (KG, girls, t-ball) e) RK Softball (1st & 2nd				vksoftball (4th, 5th & 6th girls	
b) Intro (KG, girls, t-ball) e) RK Softball (1st & 2nd c) RK Baseball (1st grade, boys combo) f) Rec Baseball (3rd & 4t		Jhawkbaseball (4th grac Jhawkbaseball (5th & 6th			
Dovont Voluntary Consider Novel all				FFICE ONLY:	
Parent Volunteer Coaches Needed! I wish to be considered as a head coach for my son's/daughter's baseball/softba Please note: Not ALL who sign up to coach will be given a team. There may be several pe	all team: (Deduct \$10 if yo	u sign up PRIOR to deadline	e) Co	ode#: 324401	
II				Check #	
Name:		School:			
Address (if different from above):			Rec. by:		
E-mail:					
I coached last year: Home Phone:				Team #:	