



DENVER KICKERS YOUTH SOCCER REGISTRATION

Denver Kickers Sport Club & Home Field-16776 W. 50th Ave Golden Colorado 80403. 303-279-9097 X2 www.denverkickers.com

TEAMS, OPTION I, INTER-LEAGUE Questions? Steve Rock: 303.467-2773, **KICKERS KIDS**

age		WEEKEND	WEEKEND	WEEKDAY	Fall Season			<i>Register Late</i>
U13	8/1/97-7/31/98							
U12	8/1/98-7/31/99	Sat. 9/11 to 11/6	Sun. 8/29	2 practices	Aug 2 to Nov 6			\$ 215.00
U11	8/1/99-7/31/00	Sat. 8/28 to 11/6	Sun. 8/29	2 practices	Aug 2 to Nov 6			\$ 215.00
age	INTER-LEAGUE	WEEKEND	WEEKEND	WEEKDAY	Fall Season			<i>Register Late</i>
U10	8/1/00-7/31/01	Sat. Sept 11	to Nov 6	2 practices	Aug 16 to Nov 6			\$120.00
U9	8/1/01-7/31/02	Sat. Sept 11	to Nov 6	2 practices	Aug 16 to Nov 6			\$120.00
		Saturdays	Saturdays					
	KICKERS KIDS	WEEKDAY	WEEKDAY	WEEKEND	KICKERS KIDS	<i>Register</i>	<i>Fall Cost</i>	<i>Register Late</i>
Age	MICRO TEAMS	Wednesdays	Thursdays	Saturdays	Fall Season	<i>On-Line</i>	<i>Due Sept 7</i>	Register Late
U8	8/1/02-7/31/04 U7	6:00-7:00 9/8	6:00-7:00 9/9	9:00-10:00	Sept 8 - Oct 30	<i>denverkickers</i>	\$ 100.00	\$105
	FAMILY SKILLS		Thursdays	9/11 to 10/30	Fall Season	<i>Picture</i>	<i>Due Sept 7</i>	Register Late
U6	8/1/04-7/31/06 U5		9/9 5:00-6:00	10:00-11:00	Sept 9 - Oct 30	<i>Special</i>	\$ 80.00	\$85

UNIFORM Black Shorts \$16, Black Socks \$5)

U9 and older (inter-league & option) Two jerseys \$62 (black and white)
Short & Shirt size of child? (circle one) Youth: S M L Adult: S M L

U8 & younger Kickers Kids Family & Micro Teams

reversible jersey Red & White \$23 -- Ask about used soccer shoes

501(c)(3) Youth Soccer Donations (request donation form if needed)

New Youth Soccer Field (\$)_____ Soccer Program (\$)_____.

Registration+Uniform+ _____ +Donation+ _____ = Total

_____+_____+_____+_____+_____ = _____

Interested (X)? Coach _____ Manager _____ Referee _____ Concessions _____

On-line Kickers Kids Registration at www.denverkickers.com

Child Name _____ Male Female (Circle) Age _____ Date of Birth _____ Phone number _____

E-mail Address _____ Parent Names _____

Address _____

(One form per child) Please make your check payment to **Denver Kickers** - send in with this form: **Youth Registrar**, 16776 W 50th Avenue, Golden CO 80403

Authorization - I, the parent / legal guardian of the registrant, a minor, agree that I and the registrant recognize the risk and possibility of physical injury associated with soccer and in consideration for The Denver Kickers accepting the registrant for its soccer programs and activities, hereby release, discharge and/or otherwise indemnify The Denver Kickers, its sponsors, employees, coaches, directors, and associated personnel, including the owners of fields, and facilities utilized for the program, against any claim by or on behalf of the registrant as a result of the registrant's participation in the program and/or being transported to or from the same, which transportation I hereby authorize. As a parent / legal guardian of the registrant, I hereby give consent for emergency medical care prescribed by a duly licensed Doctor of Medicine, Doctor of Dentistry, or associated emergency provider. This care may be given under whatever conditions necessary to preserve the life, limb, or well being of my dependant. I know of no medical, mental or physical condition that would affect my dependant's ability to participate in this activity.

Signature _____