REGISTRATION FORM 2025 FALL SOCCER REG	1 form per child; please print legibly				
WAVERLY PARKS AND RECREATION Athlete's	14130 Lancashire St P.O. Box 427 Waverly, NE 68462				
Address First: Last: Address	Cit	NE State	Zip	402.786.2312 (office) 402.786.2490 (fax) www.citywaverly.com	
Grade & School:	Age:	☐ Male	☐ Female	Date of Birth//	
Parent 1 Name:	Phone Numbers Cell:				
Parent 2 Name:	Phone Numbers Cell:				
E-Mail Address:					
Soccer Leagues Runs from Sept. 2 to Oct. 9 Games will be played on Tuesday or Thursday in Waverly Registration Deadline is August 1 st !	Tuesday G ☐ Age 3 & ☐ Age 5 ,K	ind & 1 st Girls	<u>5pm or 6:4</u>		
Volunteers are always needed for coaches: Head Coach (Coach Shirt Size)Assistant Coach (Coach Shirt Size) Head Coach may request ONE player: *Waverly Parks & Rec reserves the right to combine leagues if there are not enough participants. Participants will receive full refund if there are not enough teams to run a league.					
Registration Information (1 form per player) Fee: \$50.00 per/player \$25.00 Reusable Jersey Fee (Used for Fall & Spring S \$ 5.00 discount for each additional sibling \$10.00 late fee after Aug. 3 rd if late registrations are League Fee \$50.00 \$ Jersey Fee \$25.00 (if needed) \$		s)			
Cash □ or Check # Credit Card □ Date Received					
Player Reversible Jersey (Can be used for all fall and specific to purchase a new jersey if you already have a reversion COST: \$25 per Jersey (please circle size) Child Size: Small (6/8) Medium (10/12) Large (14/16) Adult Size: Small			rks & Rec soco	cer jersey.	
Medium					
Large					
Parents, please note: *SIGNATURE NEEDED: WAIVER AND					

Address:		City:	State:
Zip:	Telephone #:	Age of Participant _	
If Particip	oant is 18 years of age or older, only	Participant must sign. If Participant i Guardian must sign.	is 17 years Old or Younger, Parent or Legal
	ACKNOW	LEDGMENT AND ASSUMPTION O	F RISK
Nebraska ("City City. Inherent including, but exertion and te and other aspe- including but re exposure to ext natural or mar malfunction, ir inherent risks, for serious bodi	y") that, at times, may occur on proper in the Participant's voluntary part not limited to: (a) strenuous and ension on various muscle groups where the Participant's body or the last limited to closed head injury or reme conditions and circumstances; n-made objects, dangers arising from the participant's measures and participant and dangers that no amount in the Participant's voluntary of the participant is not participant.	perty owned by the City and may, at time ticipation in and/or presence at such A demanding physical exertion, strenuously the may cause serious injury to virtual Participant's general health and wellbein blunt head trauma; (c) exposure to contain and/or (e) contact with other participars madverse weather conditions, imperfect ricipants of varying skill levels. The nt of care, caution or expertise can eliminate the such as the contact with the contact we can be contact with the	es ('Activities'') organized by the City of Waverly es, utilize equipment and materials owned by the ctivities are certain risks, dangers and hazard us cardiovascular workouts, rapid movements ly all bones, joints, ligaments, muscles, tendoning; (b) concussion or other related head injurie taminants, contagions, viruses or pathogens; (conts, officials, administrators, spectators, or other tield of play conditions, equipment failure of Activities have foreseeable and unforeseeable mate, including without limitation, the potential of the person signing below voluntarily assumes these
	RELEASE AND INDE	MNITY AGREEMENT AND COVEN	NANT NOT TO SUE
			t on City property relating to such Activities, the <u>and</u> on behalf of any Minor Participant, agree as
or employees representativ a result of er whether such any other pa	(each a "Releasee" and collectively refeves, assigns, heirs, parents, legal guardinatering the property of the City, particinal injury, sickness, disease, condition, or rticipants, spectators or other individual	rred to as "the Releasees") from any and all ans, siblings, children or dependents) on acc pating in or viewing any Activities, or othe death is caused by the negligence or other	oraska, its elected officials, officers, directors, agents liability to the Participant (or Participant's personal count of injury, illness, disease, or death occurring as r use of public facilities on the property of the City, wrongful conduct of one or more of the Releasees or bility for such injury, sickness, disease, condition, or doctrine.
(including, by Participant's claim is base COVENANT	ut not limited to, attorneys' fees and or or any of the undersigned's participation d on one or more of the Releasees' neg	other defense costs) one or more of them roon in and/or entry onto the property of the egligence, breach of contract or warranty, stinjury, disease, loss, illness or death relate	each of them from any liability, damage or loss may suffer or incur arising out of or related to the City in connection with any Activities, whether such rict liability or other legal theory. The undersigned d to Participant's participation in any Activities or
notwithstand Participant a	ling, continue in full legal force and	effect to the greatest extent possible under addition to binding themselves <u>and</u> binding	ocument is held to be invalid, the balance shaler applicable law. The parents or guardian of the any minor Participant on whose behalf they have
	E OF MAJORITY, AM COMPETEN DITS TERMS. I SIGN KNOWING IT		O SIGN THIS, HAVE READ THE ABOVE AND
Signature of I		Print Clearly or Type Name	

Print Clearly or Type Name of Legal Guardian

Signature of Legal Guardian (If Applicable)