



F A Q

OFFICE USE ONLY: Date Paid: _____ \$ ____

HOW TO COMPLETE THE FORM: Please complete one form per child. If you have any special needs or requests, please make note of them, but also know that nothing is guaranteed. **Return completed form to City Hall,** or **JReynolds@ci.woodlake.ca.us**

WHAT'S THE COST?: \$50 each if signed up before Fri, Aug 16th | \$60 each until registration ends on Fri, Aug 23rd

WHAT IS PROVIDED?: Each registered child will be provided with a jersey, shorts & socks. Players will need their own cleats or sneakers.

WHEN ARE GAMES?: The season starts mid-September & will wrap up the week of Halloween. Games will be played primarily on week nights, however there will be at least two Saturdays with games and team pictures.

WHAT ARE THE AGE DIVISIONS?: This is greatly determined by the number of registrations & what ages, but we strive to keep these consistent approximate age/grade divisions: 6U (TK-Kinder), 8U (1st-2nd), 10U (3rd-5th), and 14U (6th-8th). The 6U Division will be co-ed (boys & girls).

WHEN WILL I BE CONTACTED NEXT: Once registration is closed, teams will be formed & coaches will be recruited. You will hear from your team's coach regarding a practice schedule & game schedule information approximately the 2nd week of Sept. Check social media for updates.

PLAYER'S NAME:	AGE AS-OF JULY 1st, 2024:						
CITY: Woodlake Elderwood*If other, list your City here:		Three Rivers	Badger	Ivanhoe	Seville	Exeter	Visalia
DOB:	3: GENDER: CURRENT <u>GRADE</u> IN SCHOOL ('24-'25):						
PLAYER'S UNIFORM SIZE:	Youth Small Adult Small	Youth Med		Youth Larg Adult Larg	•	Adult X-L	arge
PLAYER'S EXPERIENCE LEVEL: *Select all that apply	First-time playing	Under 5 Y	'ears Experienc	e Pla	yed 5+ Years	·	
PARENT/GUARDIAN 1:			CELL #:				o team group to
PARENT/GUARDIAN 2:			CELL #:				
EMAIL ADDRESS:				l opt	-in for ema	il updates:	
ADDITIONAL EMERGENCY CONTA							_
SPECIAL REQUESTS Please list any requests that you have guaranteed. Players in the oldest age geographical area are placed together from the same geographical area, please.	group are entered into a ron the same team when	draft & we do not l -possible for carpo	nonor requests a oling purposes. I	s a rule. Also	note that, as	s a rule, players	from the san
	·						
• Same team as this (these) oth	ier player(s):						
Same team as this (these) othRequesting this Coach:							
Requesting this Coach:							
 Requesting this Coach: Other Request/Notes: **TEAM SUPPORT** The City of Woodlake Parks & Rec pro 	grams rely on volunteer o	coaches for the ope	ration & success		ams. Please s	select what leve	el of
 Requesting this Coach: Other Request/Notes: **TEAM SUPPORT** The City of Woodlake Parks & Rec pro 	grams rely on volunteer of commit to in order to ma	coaches for the ope ake your child's seas	ration & success son a success:	of our progr			
Requesting this Coach: Other Request/Notes: **TEAM SUPPORT** The City of Woodlake Parks & Rec provolunteerism/support you are able to Head Coach (Main point Support Coach (Assist h	grams rely on volunteer of commit to in order to ma -person for team commu ead-coach as-needed at p	coaches for the ope ake your child's seas nication between C practices & fill-in on	ration & success son a success: ity & Parents, se games when He	of our progr s practice da ad Coach ca	ates & locatio n't make it, co	ns, facilitates g pordinate snack	ame play)
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Cash

Sign back of form...



Parent/ Guardian Signature

350 N. VALENCIA BLVD. WOODLAKE. CA 93286

PHONE: 559.564.8055
FAX: 559.564.8776
EMAIL: JREYNOLDS@CI.WOODLAKE.CA.US

WWW.CITYOFWOODLAKE.COM

I	HOTOGRAPHY / VIDEO RELEASE understand that the City of Woodlake Parks and Recreation may take pictures and/or video for use in a City publication, ducational purposes or social media posts. My initials indicate approval for the use of such photography/video in which or my child may appear. I understand that I will not receive compensation for the use of the pictures/video.
l fo	EFUND POLICY understand that the City of Woodlake Parks and Recreation, as a rule, does not offer refunds. Your registration is used or team, facility, referee, uniform, and staffing coordination and planning for the season. Special situations can be iscussed. My initials indicate acknowledgement of the refund policy.
during the cu	RELEASE e consent for the previously-mentioned player to participate in the City of Woodlake Parks and Recreation Programs urrent season. I give permission to the league, its officers, or representatives, to provide medical treatment in case of cy or injury to the above registered player.
	WOODLAKE PARKS AND RECREATION RELEASE. WAIVER OF LIABILITY AND ASSUMPTION OF AGREEMENT FORM. READ CAREFULLY BEFORE SIGNING.
programs, ar <i>including, bu</i>	tion of being allowed to participate in the City of Woodlake Parks and Recreation, athletic sports or recreation and related events and activities, the undersigned acknowledges, appreciates, and agrees that the risk of serious injury at not limited to, permanent paralysis, injury, and death, is significant and does exist, even though particular rules, and personal discipline may reduce the risk. Therefore:
•	VINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE ITY OF WOODLAKE or others, and assume full responsibility for my participation;
SIGNIFICA	gly agree to comply with the stated and customary terms and conditions of participation. IF I OBSERVE ANY UNUSUAL ANT HAZARD DURING MY PRESENCE OR PARTICIPATION, I WILL EITHER REMOVE THE HAZARD, IF POSSIBLE, OR INUE MY PARTICIPATION and/or bring such hazard to the attention of the nearest official immediately; and
	NGLY AGREE TO COMPLY WITH ALL STATE GUIDELINES as directed by the State of California for participation and g in regard to PROTECTION AGAINST INFECTIOUS DISEASE INCLUDING COVID-19.
Woodlake sors of th	nyself, my heirs, assigns, personal representatives and next of kin, hereby RELEASE AND HOLD HARMLESS the City of e, their officers, officials, agents, employees, volunteers, other participants, sponsors, advertisers and owners and lese premises used to conduct the event, for ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or ARISING FROM THE NEGLIGENCE of the above named organization.
the significar provided abo liabilities for	tify that I, as parent or legal guardian, have LEGAL RESPONSIBILITY for this participant. I have read and understand note of this RELEASE AND WAIVER and do consent and agree to his/her waiver, release and assumption of the risk as ove. I release and agree to indemnify and hold harmless the City of Woodlake and associated persons from any and all injury or damage to the above minor while participating in these programs ARISING FROM THE NEGLIGENCE of the blake and associated persons.

Date