

NEWMAN YOUTH SOCCER

2023

Registration: May 1st – June 2nd
Late Registration: June 5th – June 16th
After June 16th a wait list will be created.

Fee: **\$65.00**
(\$5.00 discount for each additional sibling)
Late Registration Fee: **\$75.00**
\$10 Additional Fee for all participants not residing in the
Newman-Crows Landing School District.

NO REFUNDS will be given.

No requests for coaches or teams will be honored.

All teams are coed. Open to ages 5 to 14.
*Must be 5 by September 2, 2023 and if 14 must be in 8th grade. *
Divisions are determined by number of participants.

WE NEED YOU! Volunteer coaches and assistant coaches are needed. If you are interested please contact the Recreation Department at (209) 862-4440. All volunteers must be finger printed by August 1, 2023. **Stop by the Teen Center to complete a Live Scan form.**

Practice will begin early August.
All games will be held at Sherman Park Saturdays beginning September 9th.

Register: Newman Youth Center
831 Hardin Road
Newman, CA 95360

Times: Monday-Friday
2:30 P.M. to 5:30 P.M.
(209) 862 – 4440

All participants must bring birth certificate to register if new to program.





City of Newman Recreation Department 2023 Youth Soccer

FOR OFFICE USE ONLY	
Cash <input type="checkbox"/>	Check <input type="checkbox"/> ATM <input type="checkbox"/>
Sibling Same Division <input type="checkbox"/>	
New Enrollment <input type="checkbox"/>	
Birth Certificate <input type="checkbox"/>	
Amount Paid: _____	Division: _____
Initials: _____	

Please Print

Child's Name: _____ Check One: Male Female

Birth Date: _____ Age on September 2, 2023: _____

Grade: _____ School: _____

Home Address: _____ City: _____ Zip: _____

Phone Number: _____ Parent or Legal Guardian's Name: _____

List any medical/physical condition that your child has that we need to be aware of:

During your child's participation in this activity, will he/she need use of an inhaler or other medically necessary medications? Yes No (If yes, you must fill out a Parental Consent form for Self Administration of Medicine when you register.)

Emergency Contact Name: _____ Relation: _____ Phone Number: _____
(Other than self)

Please check the correct uniform size for your child. What you check is what we will order for your child. We are unable to make changes once the order is placed.

Shirt Size: Youth Extra Small Youth Small Youth Medium Youth Large
 Adult Small Adult Medium Adult Large Adult Extra Large

Short Size: Youth Extra Small Youth Small Youth Medium Youth Large
 Adult Small Adult Medium Adult Large Adult Extra Large

Would you like to assist with this program as a volunteer coach? Yes No

If yes, Name: _____ Daytime Phone: _____

All volunteers will be fingerprinted by the Newman Police Department prior to start of season.
Please list any siblings that are also registering for this activity. If in same division, all efforts will be made to place siblings together unless otherwise noted.

SIBLINGS ONLY PLAYING IN SAME DIVISION

Name: _____ Birth Date: _____

If in same division please place together: Check One: YES NO

CONSENT OF WAIVER FOR PARTICIPANT: I understand the risks involved by participating in the above activity for which I/we are registering, and in consideration for being permitted by the City of Newman to participate in the above activity, I hereby waive, release and discharge any and all claims for damages for personal injury, death, or property damage which I may have, or which may hereafter accrue to me, as a result of participation in said activity. This release is intended to discharge in advance the City of Newman (its officers, and/or officials, employees, volunteers and agents) from any and all liability arising out of or connected in any way with my participation in said activity, even though that liability may arise out of negligence or carelessness on the part of the City, unless caused by the sole negligence of the City. It is understood that this activity involves an element of risk and danger of accidents and knowing those risks I hereby assume those risks. It is further agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns. I agree to indemnify and to hold the City free and harmless from any loss, liability, damage, cost, or expense which it may incur as the result of my death or injury or property damage that I may sustain while participating in said activity. I understand that a physician's clearance is recommended prior to participation. I hereby authorize Newman Recreation Department or its volunteers to seek medical treatment if my child becomes injured or ill.

I also understand the following refund policy: **Full refund with the exception of a \$20.00 administrative fee charge, until the final day of late registration. After the final day of late registration, NO REFUNDS WILL BE ISSUED. I understand that there is a \$20 service charge on all returned checks. This fee as well as all original charges must be paid in cash at Newman Youth Center before my child will be allowed to participate.**

I understand that requests for coaches or teams cannot be honored.

I understand that my child will not be allowed to switch teams. If I have a problem with a coach or team, I understand that the complaint must be put in writing for review by the Recreation Department.

The Recreation Department reserves the right to photograph facilities, activities, and program participants for potential future use. All photos remain the property of the City of Newman Recreation Department and may be used for art projects, good behavior recognition, and occasional publicity and promotional purposes. My signature releases the City of Newman from any and all liability and/or obligation to me and/or my child(ren) for the use of such documentation.

I understand that my child must attend practice on a regular basis in order to play in games. I understand that I must notify the coach in case of an absence.

I also understand that I must get my child to practice/games on time and pick them up on time. Remember this is your responsibility not the coaches or staffs responsibility.

I agree to conduct myself in a sportsmanlike manner at all times. I understand that this is expected of players, parents, and other family members or friends and that the Recreation Department staff has the authority to remove anyone violating this stipulation without discussion. The City retains the ability to include suspension and/or permanent exclusion should the City deem it appropriate.

ASSEMBLY BILL 2007 (Concussion-Related Injuries): I understand that Newman Recreation Department has adopted concussion-related education, awareness and protocol. By signing below, I acknowledge that I have been provided the links and/or informational sheets to read and discuss concussion-related injuries with my child. I understand the nature and risk of concussion and head injury to youth athletes, including the risks of continuing to play after concussion or head injury.

Notice Regarding COVID-19: The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend physical and social distancing, use of personal protective equipment like face coverings and have, in many locations, prohibited the congregation of groups of people. The City of Newman has implemented health and safety protocols in an effort to reduce the spread of COVID-19; however, the City cannot guarantee that you or your child(ren)/dependent(s) minor(s) will not become infected with COVID-19. Further, attending any program may increase your risk of contracting COVID-19.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren)/dependent(s) minor(s) or I may be exposed to, or infected by COVID-19 by attending the City of Newman programs and activities ("Programs"), and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at the Programs may result from the actions, omissions, or negligence of myself and others, including, but not limited to, City employees, volunteers, and program participants and their families.

I certify that I have read this contract, understand its provisions, and that the information is accurate.

Parent or Guardian's Signature

Date

Email Address

Recreation Assistance Program NOT Available

NEWMAN FÚTBOL JUVENIL

2023

Registro: mayo 1 – junio 2

Registro Tardío: junio 5 – junio 16

Después del 1 de julio se creará una lista de espera.

Costo: \$65.00

(\$5.00 descuento para cada hermano(a) adicional)

Costo de inscripción tardía \$75.00

\$10 Cargo adicional por todos los participantes que no residan en el distrito escolar Newman-Crows Landing.

NO se darán reembolsos

No se respetará ninguna solicitud de entrenadores o equipos.

* Todos los equipos son COED. Registración abierta para las edades de 5 a 14 años. *
Debe de tener 5 años para el 2 de septiembre 2023. Si tiene 14 años debe estar en el octavo grado.

Divisiones son determinadas por el número de participantes.

¡TE NECESITAMOS! Se necesitan entrenadores voluntarios y entrenadores asistentes. Si está interesado, comuníquese con el Departamento de recreación al (209) 862-4440. Todos los voluntarios deben ser comprobados por el Departamento de policía para el 1 de Agosto de 2023. Visítanos en el Teen Center para llenar una forma.

La práctica comenzará a principios de Agosto.

Todos los juegos seran programados los sábados en el parque Sherman a partir del 9 de septiembre.

Registro: Newman Centro Juvenil
831 Hardin Road
Newman, CA 95360

Tiempo: lunes a viernes
2:30 P.M. to 5:30 P.M.
(209) 862 – 4440

Todos los participantes deben presentar un certificado de nacimiento/acta para registrarse si son nuevos al programa.

