



**KEWANEE PARK DISTRICT SOCCER PROGRAM**

1 Child \$35.00  
2 Children \$50.00  
3 or more \$65.00

**\*\*\*PLAYERS MUST BE AT LEAST 4 YEARS OLD BY May 1, 2021\*\*\***

**ALL PARTICIPANTS MUST WEAR GYM SHOES AND SHIN GUARDS**

**(Soccer cleats are allowed but NOT required)**

**Practices will begin the week of April 19 and games will begin Saturday May 8th. All leagues will play at Northeast Park (weather permitting). Rain dates will be determined as needed.**

**\*\*Coaches determine their own practice schedule and will call with dates and times\*\***

**THE NEW REGULATION SIZE SOCCER FIELD IS FOR HIGH SCHOOL AND TRAVEL LEAGUE GAMES ONLY. NO ONE IS ALLOWED TO HOLD PRACTICE ON THIS FIELD.**

**\*\*\*\*\*Leagues will be divided by grade levels\*\*\*\*\***

**Registrations: Monday thru Friday 8am to 4pm @ Kewanee Park District Office, 1095 Cambridge Rd., Kewanee, IL 61443**

**Registrations may also be mailed to same address as above**

**REGISTRATION DEADLINE: THURSDAY APRIL 15, 2021 BY 4PM**

For more information contact the Kewanee Park District (309) 852-2872  
Website: kewaneeParkDistrict.org Email: k.parkdistrict@comcast.net

Player's Name: \_\_\_\_\_ Circle one: M or F

Current Grade Level: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Age \_\_\_\_\_  
(August 1, 2021)

Parent/Guardian Name: \_\_\_\_\_ Head Coach \_\_\_\_\_ Asst. \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**\*\*\*Please Circle Player Shirt Size\*\*\***

Youth: S (6-8) M (10-12) L (14-16) Adult: S (34-36) M (38-40) L (42-44) XL (46-48)

I/We the parent(s) of the above named, hereby give my/our approval to his/her participation in any and all of the league's activities. I/We assume the risk of injury incident to such participation. Further, I/We do hereby waiver, release and agree to hold harmless Kewanee Park District, Board, Officers, Coaches, Assistants, supervisors and all other participants and individuals involved in its action of any kind arising out of Kewanee Park District activities.

Parent/Guardian Signature(s): \_\_\_\_\_

**Soccer Registration**

Pay by credit card: \_\_\_\_\_ (CARD NUMBER) \_\_\_\_\_ / \_\_\_\_\_ (EXPIRATION DATE)

VISA

MASTERCARD \_\_\_\_\_ (NAME ON CARD) \_\_\_\_\_ (CVV) \_\_\_\_\_ (ZIP CODE)

DISCOVER

AMERICAN EXPRESS \_\_\_\_\_ (CARDHOLDER SIGNATURE) \$ \_\_\_\_\_ (TOTAL )

(CIRCLE ONE)