

The Soccer Centre 2007-2008 Indoor Fees and Information Form

Multiple player family discounts are available. Families can save even more by registering for all (3) Sessions.

Youth Teams can SAVE (\$40) off the 3rd Session fee. To qualify for this savings Teams will have to play all (3) Sessions

Youth Teams (8) Games per Session usually one game per week

Individual Registration Information

Individual player Fees	1 st Session Nov-Dec	2 nd Session Dec-Jan	3 rd Session Feb-Mar	Total Fee	One payment for All (3) Sessions
One Player	\$43	\$43	\$43	\$129	\$119 Save \$10
2nd Player	\$36 Save \$7	\$36 Save \$7	\$36 Save \$7	\$108	\$98 Save \$10
3rd Player	\$30 Save \$13	\$30 Save \$13	\$30 Save \$13	\$90	\$80 Save \$10

Team Registration Information

Team Fees	1 st Session Nov-Dec	2 nd Session Dec-Jan	3 rd Session Feb-Mar
Regular Team Fee	\$320	\$340	\$320
Teams playing All (3) Sessions	\$320	\$340	\$280 Save \$40
Adult Co-ed	\$320 (8 games) Oct-Nov-Dec	\$400 (10 games) Jan-Feb-Mar	

Age Division	Could be either Day
Pre-K & K (U4-U6)	Saturday mornings <u>and or</u> Monday at 5:25
1-2 grades (U7-U8)	Saturday mornings <u>and or</u> Monday /Wednesday at 5:25 - 6:15
3-4 grades (U9-U10)	Saturday mornings/afternoon <u>and or</u> Friday and or Tuesday at 5:25 - 6:15-7:10
5-6 grades (U11-U12)	Saturday mornings/afternoon <u>and or</u> Friday at 5:25-6:15-7:10
7-8 grades (U13-U14)	Thursdays <u>or</u> Fridays 5:25 -6:15 -7:10
Adult Co-ed	Sundays afternoon or otherwise requested

Coach/manager's Name:		
Address/City/Zip		
E-mail Address		
Phone:		
Work/Cell		
Team Name		
School	Grade	(if applicable)
Age Group:		Birthday of older player
Male	Female	Co-ed
Check #	Amount	Balance due
Register this Team for the following Session/s (Circle) 1st 2nd 3rd		

Team coach/manager: All age groups including adult-coed team members must have a waiver Form filled and turned in prior to their first game (no exceptions). **\$250 Deposit is required (2) weeks prior to the beginning of each Session for a Team to be placed on the schedule.**

The Soccer Centre Inc. reserves the right to cancel or modify any offerings.

Requirements One registration form per player (Soccer ball) - (Indoor soccer shoes) - or (tennis shoes).No outdoor cleats shoes allowed.

Attn: Teams and Individuals Schedule conflicts (Days or Times) if turned in early The Soccer Centre staff will try to honor as many as possible.

For more information and registration forms please go to

www.johngasparsocceracademy.com

The Soccer Centre 2007-2008 Indoor Registration Form

Peoria Heights Indoor Soccer Facility Phone: (309) 686-1413 (412 E Moneta Peoria Heights Il.)

Offers a variety of Leagues for all Age Groups male/female Games: weekdays 5:25 pm - 8:00 pm and Saturdays 8:00 am - 8:00 pm

Rentals: Birthday Parties, Practices, Meetings

Rental Fee: \$50 per hour

Add \$5 for Scoreboard

Add \$10 for Referee

Name of Participant: _____ Male _____ Female _____ Phone _____ Date of Birth ____/____/____/ School _____ Grade _____

Address: _____ City: _____ Zip: _____ Traveling Player? _____ Club? _____

Father's Name: _____ W. Or cell Phone: _____ Mother's Name: _____ W. Or cell Phone: _____

Parents E-Mail Address: _____ Special Medical Needs _____

Release Waiver

It is the player's parents or guardian's responsibility to ensure that the participant is healthy and has no physical or other ailments, problems, or conditions that would prevent the player from participating in any activities at the John Gaspar Soccer Academy, LLC (hereafter collectively referred to as Academy). It is the player's parents or guardian's responsibility to ensure that the player has medical insurance in full affect. Academy will not be held responsible or liable for any medical payments or treatment. By participating in sports or events, player, player's parents, or guardians hereby acknowledge that the player has had a physical examination in the past year and is free from any illness, disease, ailment, or other injury that would prevent the player from participating in any sports or events at the Academy. The Academy is not responsible or liable for player's illnesses, diseases, ailments, or other injuries or any events that occur due to player's illnesses, diseases, ailments, or other injuries. By participating in sports or events at the Academy or other locations, player's parents or guardians hereby acknowledge to be true that soccer is an active and potentially dangerous physical sport. Injuries can occur during any time in the game of soccer that my result not only from the player's actions, but also from other people or other objects. By participating in sports or events at the Academy, player, player's parents and player's guardians hereby acknowledge and agree that the Academy will not be held responsible or liable for any negligence, intentional actions, injury, or other risks that the player may incur. Additionally, player, player's parents, and player's guardians hereby assume the risk and accept personal liability for any of the above. Player, player's parents and player's guardians hereby agree to indemnify and hold harmless the Academy and its successors and assigns for anything the Academy may be held liable for. Player, player's parents and player's guardians agree to not sue or bring any other action, in law or equity, in the courts or in any administrative proceeding, against the Academy, the Academy's successors and assigns, the Academy's employees, and anyone associated with the Academy. If player is injured during any sports or events at the Academy, player's parents and player's guardians hereby agree to allow the Academy to make, in the absence of player's parents or player's guardians being present, health care decisions on behalf of the player. Player, player's parents and player's guardians hereby agree to hold harmless and indemnify the Academy for any liability, loss or other damage that is the result of any activity.

Parent/Guardian signature: _____ Date _____
(Player signature) if 18 years of age or older _____ Date _____

Would you help coach your son/daughter's Team? _____

Who is your Child's Coach? _____

This check is to pay for how many players? _____ Who? _____

Logo T-Shirts for indoor league play are (White) and (Maroon) Fee for both t-shirts: (\$20 youth) (Adult \$24) Are you paying for shirts? _____

Size: Youth (S)____(M)____(L)____ Adult (S)____(M)____(L)____(XL)____

Do not pay for the indoor games on the same check if you are also making payment for the Academy Indoor Training Thank you very much.

Please make check payable to: the Soccer Centre

Mail to: 412 E Moneta Ave., Peoria Heights, Illinois 61616 Phone: 309- 686-1413

For more information regarding the John Gaspar Soccer Academy Indoor Training Programs – Clinics and Traveling Teams

Go to johngasparsocceracademy.com

For Office Use Only:

Team: _____ 1st Session Individual: _____ Check # _____ Amount: _____ Balance: _____

Team: _____ 2nd Session Individual: _____ Check # _____ Amount: _____ Balance: _____

Team: _____ 3rd Session Individual: _____ Check # _____ Amount: _____ Balance: _____