

City of Henderson

2021 YOUTH SOCCER LEAGUES

Program goals | Everyone plays • Positive coaching • Balanced teams • Fundamentals • Good sportsmanship

AGE DIVISIONS

The effective date of age determination for soccer is the player's age as of September 30, 2021. Players who are at least 5 years old as of this date are eligible to participate. If there is an age discrepancy, we reserve the right to request birth certificate or other official documentation for team placement.

Division	Age	Eligible Birth Dates
U6	5	10-1-15 thru 9-30-16
U8	6-7	10-1-13 thru 9-30-15
U10	8-9	10-1-11 thru 9-30-13
U12	10-11	10-1-09 thru 9-30-11
U14	12-13	10-1-07 thru 9-30-09
U19	14-18	10-1-02 thru 9-30-07

ENROLLMENT

Registration prior to August 16

One child: \$66

Additional siblings: \$59.40 per child

Registration on/after August 16

One child: \$75

Additional siblings: \$67.50 per child

Non-residents add 15%

Players must be from the same immediate family to receive the discount. We reserve the right to request supporting documentation.

WAYS TO REGISTER

Online, mail-in, and drop-off registration through August 10

Drop-off registration

Accepted at all recreation centers, the Sports Office and player ratings, space permitting

Mail your registration to:

Arroyo Grande Sports Complex, 298 Arroyo Grande Blvd., Henderson, NV 89014

For information:

702-267-5717 | cityofhenderson.com COHyouthleague@cityofhenderson.com City of Henderson leagues are designed to guide each participant through an organized program and to develop the fundamental skills of soccer while emphasizing fun and sportsmanship.

- U6 and U8 divisions do not keep scores or standings
- Days, times and locations of practices are at the volunteer coach's discretion
- Teams are formed according to the player rating system
- U6 and U8 player requests may not be granted during late registration
- Youth Sports league timelines subject to change based on registration and volunteer coach recruitment

PLAYER RATINGS

Player ratings will be held at Heritage Park, 350 E. Racetrack Rd.

Division	August 13	August 16
No ratings for U6 or U8		
U10	6pm	6pm
U12	7pm	7pm
U14/U16/U19	7:30pm	7:30pm

Practices begin: Week of August 30 Games begin: Saturday, September 25

Season ends: Saturday, November 6

REGISTRATION CODES

Zone 1: For youth residing within 89002, 89005, 89009, 89011, and 89015 ZIP codes.

Zone 2: For youth residing within 89011, 89014, 89074, and Las Vegas ZIP codes (except 89123 & 89183)

Zone 3: For youth residing within 89012, 89044, 89052, 89053, 89123 and 89183 ZIP codes

Zone	Division	Code
1	U6 Co-Rec	634050-68
2	U6 Co-Rec	634051-68
3	U6 Co-Rec	634052-68
1	U8 Boys	634053-68
2/3	U8 Boys	634054-68
1/2/3	U8 Girls	634055-68
1/2/3	U10 Boys	634056-68
1/2/3	U10 Girls	634059-68
1/2/3	U12 Boys	634062-68
1/2/3	U12 Girls	634065-68
1/2/3	U14 Boys	634068-68
1/2/3	U14 Girls	634071-68
1/2/3	U19 Boys	634074-68
1/2/3	U19 Girls	634077-68
Interested soccer coaches		634080-00



Youth Sports Registration Form

THIS FORM CAN BE COPIED • PLEASE PRINT AND FILL OUT COMPLETELY

Sports Office • 298 Arroyo Grande Blvd., Henderson, NV 89014

Parent/Guardian: First		Last				
Street Address		Apt.#	City State ZIP		ZIP	
Home Phone	Cell Phone	Emergency Phone		Email Ad	I Idress	
Participant #1: First		Last				
Birthdate	Age	Height	,	Gender		
Participant #2: First		Last				
Birthdate	Age	Height		Gender		
Participant #3: First		Last				
Birthdate	Age	Height		Gender		
	All refunds are subject	to a \$5 service ch	iarge.			
 Requests submitted af U10-U19 division playe Player requests are one of many will make final determination on 	e on the youth sports registration ter player rating days will not be er requests will not be honored; to variables considered when mal roster placement. Place your re	e honored teams are forme king teams. Thes equest here:	e requests are i	not guar	anteed.	The Sports Offi
Your child's name	requests to be withRequested	child's name	. Both players are	registered		Ub U8 divisior ase circle one
	Fitness & Sports Activity Waiv	er Of Liability and	Disclaimer			
I, as the participant or parent or legal guardian of the health, and in proper physical condition to participate and have substantial risks of injury such as transmiss form and may involve the risk of serious bodily injury, injury, joint pain, pelvic discomfort, knee or hip dislocamay be caused by my own, or the above-named child or the negligence of the Releasers described below; responsibility for injury, losses, costs, and damages I, I hereby release, discharge and covenant not to sue that a result of my or the above-named child's voluntary save, and hold harmless each of the Releasers from a next paragraph. This release, waiver of liability, and express assumptional representations, statements, or inducements apa I have, or will, inspect the facilities and equipment to	sing to it you will be waiving and releasing claims for poten above-named child, acknowledge that I understand the pf in such activity. I further recognize and acknowledge that ion of diseases. I fully understand that fitness and sports c including, but not limited to, broken bones, torn ligaments, ation, punctures, abrasions, bruising, and shortness of bre 's actions or inaction; or by others participating in this ever and that there may be other risks either not known by me, or the above-named child, incur as a result of my or the al the City of Henderson, their respective administrators, dire y participation in this activity. If I, or anyone on behalf of m my liability, loss, damage, or cost, whether for personal injurion of risk agreement does not apply to any liability, claims, art from this waiver and release have been made.	ysical nature of this fitness or all athletic activities involving lasses may incorporate comp dislocated joints, head injury, ath which may result in perma to the thick may result in perma to the above-named child, or prove-named child's participati ctors, agents, officers, volunte e or the above-named child, arry or property damage, which demands, losses, or damages unsafe conditions exists, I will	r sports activity and that I, or g strenuous exertion or potte jound whole-body movement stroke, loss of consciousnes anent disability, paralysis and of any equipment or apparat not foreseen at this time. I ful ion in the activity. Bers and/or employees (Rele nakes a claim against any of h they may incur as a result of s arising out of the intentional I immediately advise a class	the above-nantial body conta ts that demand ss, cardiac arre d/or death. I unus; the condition lly accept and of asers) for occu, the Releasers, of such claim, of al, willful, or wa trainer of such	ned child, am/ act are hazard focus and con sst, muscle str derstand that ons in which th expressly assu rrences of an I or my estate except to the e inton miscond condition and	is qualified, in good lous fitness activities nostant attention to rain and sprain, back these and other risks he event takes place, ume all such risks and y nature or kind arising e will indemnify, defend, extent described in the luct of Releasers. No
Participant/parent/guardian signature	е		e			



CITY OF HENDERSON COVID-19 ASSUMPTION OF RISK/WAIVER/RELEASE

Assumption of the Risk and Waiver of Liability Relating to Coronavirus/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 social distancing and have, in many locations, prohibited the congregation of groups of people. The City of Henderson (the "City") has created new protocols and put in place preventative measures to reduce the spread of COVID-19; however, the City cannot guarantee that you or your child(ren) will not become infected with COVID-19. Further, attending any program may increase your child(ren)s risk of contracting COVID-19.

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By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to, or infected by COVID-19 by attending the City program, 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 City program 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 voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself including, but not limited to, personal injury, disability, and death, illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)s attendance at the City program.

On my behalf, and on behalf of my child(ren)s, I hereby release, covenant not to sue, discharge, and hold harmless City, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of the City, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any City program.

Signature of Parent/Guardian	Date	
Print Name of Parent/Guardian	Name of Participant(s)	