

Program goals | Inclusive environment • Positive coaching • Balanced teams • Fundamentals • Good sportsmanship

AGE DIVISIONS

The effective date of age determination for soccer is the player's age as of August 8, 2022. 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	Eligible Birth Dates
U6	8-9-16 thru 8-8-17
U8	8-9-14 thru 8-8-16
U10	8-9-12 thru 8-8-14
U12	8-9-10 thru 8-8-12
U14	8-9-08 thru 8-8-10
U19	8-9-04 thru 8-8-08

ENROLLMENT

Registration on or before August 13

One child: \$66

Additional siblings: \$59.40 per child

Late registration on August 23.

No registration accepted during team building: August 14-22.

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 13

Drop-off registration

Drop-off registration accepted at all Henderson recreation centers, the Sports office and player ratings, space permitting. Late registration includes enrollment from the interest list. If approved, a balance will be placed on the household account. Once the customer is notified of the balance, payments must be made within 72 hours.

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
- Practices days, times and locations are at the volunteer coach's discretion
- U10-19 player requests will not be honored. In these age divisions teams are formed exclusively through the player rating system. If a rate-up is desired, the child must attend player ratings. Rating up does not guarantee placement in the league. Placement is based on the child's skill level and roster availability.
- U6 and U8 player requests may not be granted during late registration
- Youth Sports league timelines are subject to change based on registration demand and volunteer coach recruitment.
- Program capacity is limited due to program resources, please register early. Late registration is not guaranteed. If your child is enrolled from the interest list, the late registration fee will apply.

PLAYER RATINGS

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

Division	August 12	August 13
No ratings for U6 or U8		
U10	6pm	9:30am
U12	7pm	10:30am
U14/U16/U19	7:30pm	11:30am

Practices begin: Week of August 29

Games begin: Week of September 19

Season ends: Week of October 24

REGISTRATION CODES

Division	Code
U6 Co-Rec	634050-68
U8 Boys	634053-68
U8 Girls	634055-68
U10 Boys	634056-68
U10 Girls	634059-68
U12 Boys	634062-68
U12 Girls	634065-68
U14 Boys	634068-68
U14 Girls	634071-68
U19 Boys	634074-68
U19 Girls	634077-68
Interested soccer coaches	634080-00

Parent/Guardian: First		Last		
Street Address		Apt.#	City	State ZIP
Home Phone	Cell Phone	Emergency Phone	Email Address	
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 charge.				

Parents may request placement with one other player in the same division, **for U6 and U8 divisions ONLY**.

- Parents/legal guardians may request placement with ONE other player who is registered in the same division, for U6 and U8 ages only. Multiple player and specific coach requests will not be honored. Requests must be mutual (ex: Player A must request Player B. Player B must request Player A).
- Request must be made on the youth sports registration form
- Requests submitted after player rating days will not be honored
- U10-U19 division player requests will not be honored; teams are formed by the player rating system in these divisions

Player requests are one of many variables considered when making teams. These requests are not guaranteed. The Sports Office will make final determination on roster placement. Place your request here:

_____ requests to be with _____. Both players are registered in the **U6 U8** division.
 Your child's name Requested child's name Please circle one

Fitness & Sports Activity Waiver Of Liability and Disclaimer

Please read this carefully and be aware that by agreeing to it you will be waiving and releasing claims for potential injuries and property damage arising from participation in this fitness or sports activity.

I, as the participant or parent or legal guardian of the above-named child, acknowledge that I understand the physical nature of this fitness or sports activity and that I, or the above-named child, am/is qualified, in good health, and in proper physical condition to participate in such activity. I further recognize and acknowledge that all athletic activities involving strenuous exertion or potential body contact are hazardous fitness activities and have substantial risks of injury such as transmission of diseases. I fully understand that fitness and sports classes may incorporate compound whole-body movements that demand focus and constant attention to form and may involve the risk of serious bodily injury, including, but not limited to, broken bones, torn ligaments, dislocated joints, head injury, stroke, loss of consciousness, cardiac arrest, muscle strain and sprain, back injury, joint pain, pelvic discomfort, knee or hip dislocation, punctures, abrasions, bruising, and shortness of breath which may result in permanent disability, paralysis and/or death. I understand that these and other risks may be caused by my own, or the above-named child's actions or inaction; or by others participating in this event; by the use and adjustment of any equipment or apparatus; the conditions in which the event takes place; or the negligence of the Releasees described below; and that there may be other risks either not known by me, or the above-named child, or not foreseen at this time. I fully accept and expressly assume all such risks and responsibility for injury, losses, costs, and damages I, or the above-named child, incur as a result of my or the above-named child's participation in the activity.

I hereby release, discharge and covenant not to sue the City of Henderson, their respective administrators, directors, agents, officers, volunteers and/or employees (Releasees) for occurrences of any nature or kind arising as a result of my or the above-named child's voluntary participation in this activity. If I, or anyone on behalf of me or the above-named child, makes a claim against any of the Releasees, I or my estate will indemnify, defend, save, and hold harmless each of the Releasees from any liability, loss, damage, or cost, whether for personal injury or property damage, which they may incur as a result of such claim, except to the extent described in the next paragraph.

This release, waiver of liability, and express assumption of risk agreement does not apply to any liability, claims, demands, losses, or damages arising out of the intentional, willful, or wanton misconduct of Releasees. No oral representations, statements, or inducements apart from this waiver and release have been made.

I have, or will, inspect the facilities and equipment to be used in conjunction with this event and if I believe any unsafe conditions exists, I will immediately advise a class trainer of such condition and refuse to participate until such condition is corrected. I further acknowledge that I have been advised by the City of Henderson to seek the advice of a health care provider prior to my, or the above-named child's, participation in this activity.

Participant/parent/guardian signature

Date



Supporting the Americans with Disabilities Act, does patron require assistance?

☐ Yes

☐ No

If yes, please specify:

Please return to: Sports Office, 298 Arroyo Grande Blvd., Henderson, NV 89014



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)