



Iddy Biddy Soccer Registration Form

WHERE: Parks & Recreation Softball Fields (La-Z-Boy Sports Complex)

AGE: Boys and girls ages 3 - 4

FEE: \$35.00 per child (includes t-shirt and soccer ball)

WHEN: Saturday, April 28th, May 5th, 12th and 19th

3 years old at **9:00 am**

4 years old at **10:00 am**

EQUIPMENT: Shin guards are not required

If weather is questionable, please call or text 479-427-0852 for possible cancellations.

Cancellations will be posted on Facebook, Twitter and sent via email through the City's Get Updates notification system.

(Sign up for Get Updates at www.siloamsprings.com)

Child's First Name: _____ Child's Last Name: _____

Child's Date of Birth: ____/____/____ Age on Saturday, April 28th _____

Circle One: MALE FEMALE

Parent's First Name: _____ Parent's Last Name: _____

Parent's Home Phone: (____) _____ Parent's Cell Number: (____) _____

- **Has your child participated in Iddy-Biddy Soccer before?** ____ Yes ____ No

RELEASE OF LIABILITY

I agree to assume the full risk of any injuries, damages, or losses that I or any minor for whom I am responsible may sustain as a result of participation in this program or event. I do hereby fully release and discharge the City of Siloam Springs, its officers, agents, and employees from any and all claims from injuries, damages, or loss that I, or my minor child or ward, may suffer on account of said participation. I further agree to indemnify and hold harmless the City of Siloam Springs, its officers, agents, and employees from all claims, suits, actions, injuries, damages, and losses sustained by me or my minor child or ward arising out of or in any way connected with said participation.

I have read and fully understand the above Waiver and Release of all claims.

Printed Name of Parent/Legal Guardian/Adult Participant _____

Signature of Parent/Legal Guardian/Adult Participant _____ Date _____

Office Use Only Cash Check # _____ Amount _____ Processed By _____ Date _____ Receipt # _____