



# High School Boys TRYOUTS Spring 2019 Season

## Tryout PRE-Registration Form

**Register on line! <https://webtrac.decalur-parks.org>**

Mail or drop off at Decatur Indoor Sports Center (DISC), 1295 W. Wood

Tuesday, November 6, 2018

7:00 p.m. - 9:00 p.m.

U15- U19

\$10 Tryout fee before October 22<sup>nd</sup>; \$15 after (shirt size not guaranteed)

MidState Soccer Complex

1 Educational Park Drive (Directly across from Stephen Decatur Middle School off of Mound Road)

\*We will HOST tryouts OUTSIDE unless of inclement weather\*

**\*If inclement weather we will host INSIDE @ Decatur Indoor Sports Center on November 6<sup>th</sup> @7pm**

Trying out for	YEAR BORN
U15	2004
U16	2003
U17	2002
U18	2001
U19	2000

Name of Participant \_\_\_\_\_ T-Shirt Fee \$10 \_\_\_\_\_ (\$15 after 10/22)

Participant Age \_\_\_\_\_ Birthdate \_\_\_\_\_ T-Shirt Size \_\_\_\_\_

Participant Grade \_\_\_\_\_ Participant School \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Parent Home Phone \_\_\_\_\_

Cell Phone(s) \_\_\_\_\_ Parent E-Mail Addresses \_\_\_\_\_

### Please choose ONE:

I can attend Nov 6 \_\_\_\_\_ I cannot attend Nov 6 \_\_\_\_\_ but would like to attend make up tryout (TBD)

### DECATUR PARK DISTRICT VSI# 390020-06

#### PROGRAM INFORMATION: WAIVER AND RELEASE OF ALL CLAIMS

This WAIVER AND RELEASE OF ALL CLAIMS is provided for the Decatur Park District in consideration of enrolling the undersigned in one or more of the following programs. This waiver will be in effect for the duration of each program within which the participant has enrolled.  
**( X ) Soccer Tryouts**

The enrollment of which is hereby acknowledged; the undersigned does hereby release, acquit and forever waive and discharge the Decatur Park District and its officers, agents, servants and employees from any and all actions, causes of action, claims, demands, damages, costs, expenses and compensation because of, or in any way growing out of, injuries claimed to have been received by the undersigned, or the undersigned's minor child, because of participating in the above-mentioned Decatur Park District program.

As a participant in the above-mentioned program, I recognize and acknowledge there are certain risks of physical injury, such as broken arms/legs and other bones, ligament/tendon damage, and I agree to assume the full risk of injuries, including death, damages or loss that I or my minor child may sustain as a result of participating in any activities connected with or associated with such program.

I agree to waive and relinquish all claims I, or my minor child may have as a result of participating in the above-mentioned program against the Decatur Park District and its officers, agents, servants and employees. I further agree to indemnify and hold harmless and defend the Decatur Park District and its officers, agents, servants and employees from any claims resulting from injuries, including death, damages and losses sustained by me or my minor child that arise out of, in connection with or in any way associated with the activities of this program.

**I HAVE READ AND FULLY UNDERSTAND THE ABOVE WAIVER AND RELEASE OF ALL CLAIMS.**

\_\_\_\_\_  
Participant Name

\_\_\_\_\_  
Emergency Contact

\_\_\_\_\_  
Parent/Guardian of Participant

\_\_\_\_\_  
Date