



# Youth Indoor Soccer



Join our recreational soccer league with no boundaries, literally. This league is a great way to build soccer and social skills while being in a fun, noncompetitive league. Any parent who coaches gets a **free registration** for their child. Reversible jerseys will be loaned out to each player, to be returned after the last game. *Sign up early, player and coach space is limited.*

**Register ONLINE at <https://register.cityofcamas.us>.**

*Coaches can register teams in person at the Lacamas Lake Lodge, 277 NE Lake Road*

## Kinder Cup League — Kindergartners only —

**Class Code: 13040**



- 4 players on a side, 8 on a team
- 1.5 hrs - (20 min practice, 40 min game)
- Coed teams
- Goalie & 1/2 court
- Volunteer coaches receive a full refund of their child's fee.

**Cost:**

- Individual: \$55 (in-city) \$65 (out-of-city)  
-OR-
- Team (8 players): \*\*\$364  
*\*\*Registrations and team fee must be submitted together with one check - comes to \$52 per player - coach does not pay.*

**Days:** Sundays

**Dates:** March 4 - April 22 (no games 4/1 or 4/8)

**Time:** 1:00PM - 6:00PM (1 hour)

**Sign up Deadline:** February 25

**Location:** Camas Community Center Ballroom

## Pee Wee League — 4 or 5 year old Pre-schoolers —

**Class Code: 13043**



- Three players on a side, six players on a team
- 30 min - (10 min practice, 20 min game)
- Coed teams
- No goalie & 1/2 court
- Volunteer coaches receive a full refund of their child's fee.

**Cost:**

- Individual: \$45 (in-city) \$55 (out-of-city)  
-OR-
- Team (6 players): \*\*\$210  
*\*\*Registrations and team fee must be submitted together with one check - comes to \$42 per player - coach does not pay.*

**Days:** Sundays

**Dates:** March 4 - April 22 (no games 4/1 or 4/8)

**Time:** 1:00PM - 6:00PM (30 minutes)

**Sign up Deadline:** February 25

**Location:** Camas Community Center Ballroom

**Call Camas Parks & Recreation at 360-834-5307 for more information.**

**Register online at <https://register.cityofcamas.us>**

# Youth Indoor Soccer Registration

Camas Parks and Recreation (360) 834-5307

Our offices are located at Lacamas Lake Lodge, 227 NE Lake Road Office Hours: Monday - Friday 8:00am - 5:00pm  
Mailing Address: 616 NE 4th Ave., Camas, WA 98607

Register Online at: <https://register.cityofcamas.us>

## Individual Player Registration

Adult's Name: \_\_\_\_\_ Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Work Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_  
Daytime Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_  
Participant Name: \_\_\_\_\_  
Grade: \_\_\_\_\_ Birthdate: \_\_\_\_\_ T-Shirt Size (circle one): YS YM YL AS

\* If interested in coaching, please write coaches name here: \_\_\_\_\_

## Team Registration

Team Name: \_\_\_\_\_  
Choose League (circle one): Kinder Cup League Pee Wee League

\* When signing up as a team, please have each player fill out an Individual Player Registration Form, coaches submit all forms together with the team fee. *Coaches must register teams in person at the Lacamas Lake Lodge, 277 NE Lake Road*

## GENERAL INFORMATION:

**Registration:** Registration is accepted on a first come, first served basis. Receipt of payment will reserve a place in the activity. Some activities have space limits. Register early to ensure your space.

**Payment:** Make checks payable to: City of Camas. Mail to: Camas Parks and Recreation, 616 NE 4th Ave., Camas, WA 98607.  
Or deliver to: Lacamas Lake Lodge, 227 NE Lake Road, Camas.

**Cancellation:** Cancellation of activity may occur due to low enrollment, weather conditions, or circumstances beyond our control. Registered participants will be notified of cancellation.

**Refunds:** Participants will receive a total fee refund if Camas Parks and Recreation cancels or postpones an activity, or when participant cancels before the second meeting of a series. Participants who do not show up for one day activities will not be given refunds. Sports League refunds: No refunds of team fees are given once league schedules are set. Player fees are not refundable after the second scheduled game.

**Parent responsibilities:** Parents may be required to sign their children in and out for youth activities. Transportation is not provided unless otherwise noted.

**Photos:** Activity participants may be photographed for promotional purposes related to Camas Parks and Recreation. If you do not wish for you/your child to be photographed, please provide a written note to the Recreation Coordinator.

**Sponsorship:** Assistance is available to youth participants with financial need. Sponsorships are offered by the Friends of the Camas Community Center and can be requested by calling 360-834-5307.

**Non Discrimination Policy:** The City of Camas prohibits sex discrimination in the operation, conduct or administration of community athletics programs for youth or adults. Third parties who receive leases or permits from the City of Camas for community athletics programs are also prohibited from discriminating on the basis of sex. In addition, the City of Camas does not discriminate on any other basis protected by federal or state law, including race/color, creed (religion), national origin, sex, disability, use of a guide dog or service animal by a person with a disability, HIV/AIDS or Hepatitis C status, sexual orientation/gender identity, or honorably discharged veteran and military status. If you have questions, wish to file a complaint, or require a reasonable accommodation for a disability; please contact Jennifer Gorsuch at P.O. Box 1055, Camas, WA 98607, phone (360) 817-1530.

**WAIVER:** I hereby acknowledge that I understand that in all activities of the City of Camas Parks and Recreation there are risks of accidents that could result in bodily harm. I understand that the City of Camas Parks and Recreation activities are planned with the utmost thought and prudence, and with the safety of participants in mind. I further acknowledge that I/my child have the physical capacity reasonably necessary to engage in the activity for which I/my child have registered for. However, I/my child do hereby waive all claims which I/my child might have against the City of Camas or any of its officers, agents, or employees by reason of bodily injuries which I/my child might suffer arising out of my/my child's participation in the program. In case of emergency, accident or illness, I give my permission for me/my child to be treated by a professional medical person and admitted to a hospital if necessary. I agree to be the party responsible for all medical expenses which are incurred in my/my child's behalf.

Participant's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_