



HOMER SOCCER CLUB

14234 South Bell Road • #158 • Homer Glen, IL 60491

Web Address: www.homersoccer.org

**ONLINE
REGISTRATION at
homersoccer.org**

Jim Pearson
President

Marco Majka
1st Vice President

Dave Dilger
2nd Vice President

Kevin DeYoung
Treasurer

Tom Sible
Secretary

SPRING 2008 RECREATIONAL REGISTRATION

Boys and girls from 5 years (as of August 1, 2007) to 14 years old (as of August 1, 2007). Children entering high school, but not playing on a high school team are eligible to play.

TWO WAYS TO SIGN UP • ONLINE AT www.homersoccer.org or BY MAIL TO **Homer Soccer Club**,
14234 S. Bell Road, #158, Homer Glen, IL 60491
BY JANUARY 28, 2008 (LATE FEE WILL BE CHARGED AFTER FEBRUARY 25th)

The Spring season is tentatively scheduled for Saturday, April 5, 2008. Games are played on Saturdays with one practice during the week.

Traveling Team try-outs for the Fall 2008 Season will be listed on the website, www.homersoccer.org.
Check for try-out times and dates.

FEES	SPRING 2008	
	1st Child	\$110.00
	2nd Child	\$90.00
	3rd Child	\$55.00
	Family Participation Fee	\$50.00

Note: Participation fee will be refunded after completion of volunteer work, including coaching, concession stand work, field maintenance.

Last Name _____ Child's First Name _____
 Male Female Date of Birth _____
 Mother's Name _____ Father's Name _____
 Address _____ City _____ Zip _____
 Home Phone: () _____ Emergency Phone: () _____
 Email: _____ Years of Playing Soccer _____

TOTAL _____ CASH: _____ CHECK NUMBER: _____

Make check payable to **Homer Soccer Club**

VOLUNTEER WORK

Name: _____

CHECK ONE: Coach Asst. Coach Ground & Maintenance Concession Stand Call Me

PLEASE READ THIS SECTION BEFORE SIGNING

Waiver of Liability: Having been informed of the organization to provide supervised activities for boys/girls, I the parent/guardian of the above named children do hereby give my permission for his/her participation in any and all of the activities during the current season. I do assume all of the risks and hazards incidental to the conduct of the activity, transportation to and from the activity, and I do further hereby release, absolve, indemnify, and hold harmless the **Homer Soccer Club**, the leagues, sponsors, organizers, supervisors, any and all of them. In case of injury to my son/daughter, I hereby waive all claims against the organizers, sponsors, or any of the supervisors appointed by them. I likewise release from responsibility any person transporting my son/daughter to and from any activity.

Note: Homer Soccer Club does NOT provide primary medical insurance.

Conditions of Participation:

1. I agree to pay all fees in full before this application is accepted.
2. No refund given after the start of the season.
3. A \$50.00 administration fee will be charged for refunds after teams have been drafted.
4. A Late fee will be charged for registration fees postmarked after deadline date..

PARENT/GUARDIAN SIGNATURE _____ Date _____

NOTE: NO REFUNDS GIVEN AFTER START OF SEASON

HSC BOARD REP. _____

*Home of: • Homer Recreational Soccer Teams • Homer Hawks Traveling Soccer Teams
Homer Soccer Club • 14234 S. Bell Road #158 • Homer Glen, IL 60491*

This activity is not sponsored by Homer School District 33C, any of its schools, or groups officially associated with the districts.

