

RICHMOND PARKS & RECREATION



SOCCER LEAGUE



The purpose of the Richmond Parks & Recreation Soccer League is for the participants to have fun and to learn the fundamental skills of soccer as well as working towards the following goals: learning teamwork, building self-esteem, teaching social and physical skills, creating a fun experience for youth, teaching decision making, responsibility, leadership, and respect for authority, as well as other character traits.

Registration Fee: 1 child-\$65.00
(each additional child-\$60.00)

REGISTRATION DEADLINE: FEBRUARY 5, 2025

Late entry forms will be accepted until teams are full after deadline.
Late entry fee (after registration deadline): an additional \$15.00/ child (no multi-child discount)

All soccer teams in the league are co-ed. The divisions for the league are determined based upon what grade the participant is in. Please mark (below) which division the participant should be in.

Divisions	Grade	Division participant will be playing in for the 2025 season (please mark below)
*PreU	Preschool & under	
K/1	K-1	
2/3	2nd-3rd	
**4	4th	
**5/6	5th-6th	
**7/8/9	7th-9th	

***must be 3 years of age on or before 4/1/2025 to be eligible for the 2025 season.**

** 7/8/9, 5/6, and 4 division is a traveling league. Hosting towns involved are Richmond, Lexington, Odessa, Higginsville, and possibly other towns. Games will be weekdays & Saturdays. First Game: end of March (pending weather).

2/3, K/1, and PreU divisions will not travel. Games will be on Saturdays and some weekdays. First Game: March 29.

Child's Name _____ Date of Birth _____ / _____ / _____

Child's age as of 4/1/25 _____ Grade: _____ Male: _____ Female: _____ Shirt Size YXS YS YM YL AS AM AL AXL AXXL

Parent/ Guardian Name _____ E-mail address _____

Address _____ City _____ Zip Code _____

Cell Phone _____ Cell Phone _____ Work Phone _____

Emergency Contact _____ Phone _____ Relationship _____

Health concerns of participant the Parks and Recreation Department/coach should be aware of:

I am interested in volunteering as Head Coach: _____ Shirt Size: AS AM AL AXL 2XL 3XL

Head coach picks one assistant coach: _____ Shirt Size: AS AM AL AXL 2XL 3XL

If you are selected to be a coach, the Parks & Recreation department will contact you on or before draft dates.

Drafts & Coaches meeting will be TBA for: 7/8/9 Division, 5/6 Division, 4 Division.

K/1 Division: 2/26/25@ 5:30pm; PreU Division: 2/26/25 @ 6:30pm; 2/3 Division: 2/26/25@ 5:30pm. Location: TBA

I, the parent/ guardian of the above named candidate for a position on a Parks & Recreation team, hereby give my approval to participate in any and all Parks & Recreation activities, including transportation to and from the activities. I am aware that participation in the youth soccer league may result in serious injuries and protective equipment does not prevent all injuries to players. I hereby waive, release, absolve, indemnify and agree to hold harmless the Richmond Parks & Recreation Departments, City of Richmond, the organizers, sponsors, supervisors, officials, participants and persons transporting my child to and from activities for any claim arising out of any injury to my child whether the result of negligence, COVID-19, or for any other cause. I agree to return equipment issued to my child in as good of condition as when received it, except for normal wear and tear. In addition, I agree, understand, and allow the City of Richmond to take and use my or my child's photograph, likeness, name, statement, or video. I understand that the City of Richmond may use the photograph, likeness, name, statement or video for the purposes of publication, presentation, websites, and social media channels. I have read and fully understand the above program details and waive and release all claims. If a "special request" is made, the Richmond Parks & Recreation Department cannot guarantee that the request will happen. Our teams are selected by the coaches through a draft. If you have a "special request" (such as you want your child to be on a certain team, with a certain coach, not with a certain coach, or on the same team as another participant) please write your request here: _____ Coaches will see your request. Again, we will try our best to follow through with your request, but it is not guaranteed. Siblings or others living in the same household will be placed on the same team.

Once a participant is placed on a team they will not be switched. No Refunds.

Signing below means you are aware this is a game for the KIDS to have FUN and that you have read and agree with the above.

Parent/Guardian Signature _____ Date _____

Please return to the Front Desk of City Hall, 205 Summit, Richmond, MO 64085.

City Hall is open M-F, 8:00am-4:30pm. If after 4.30pm, you may put this form/money in the "After Hours" box outside of City Hall—NO CASH IN THE "AFTER HOURS" BOX. IF YOU DO NOT PAY THE FULL AMOUNT STATED ABOVE, AT THE TIME YOU RETURN YOUR FORM, YOUR CHILD WILL NOT BE ELIGIBLE TO PLAY IN THE LEAGUE.

Please make checks payable to: City of Richmond. **League Questions? Please e-mail: Hwilliams@cityofrichmondmo.org**

OFFICE USE ONLY: AMOUNT: \$ _____ DATE RECORDED: _____ BY: _____

Soccer Revenue: 10-21-06-4460