2026 Spring Youth Soccer Registration Form

Mt. Vernon Parks & Recreation Department

(All leagues are Co-ed)

Please fill out this form and return to the Parks & Recreation Department Office,
716 Locust Street (Hedges Elem. Entrance #8) or mail to P.O. Box 324, Mt. Vernon, Indiana 47620.
Office hours are Monday – Friday, 8 a.m. - 5 p.m.

All registrations are due by **Friday, March 27 at 5 p.m.** ***(check Facebook for online signup!)***

2-6th Grade Evaluations March 30/Games start April 11

Jr. Kickers will be on Tuesdays and Thursdays starting April 7

The soccer fields are on Smith Road, north of Brittlebank.

Jr. Kickers (4&5 year olds), **K-1st, 2-3rd, 4-6th** **$35 per participant, additional child $20.**

(scholarships available/sign-up online!)

Name _____ Grade _____ Gender _____

Address _____

(Main) Phone _____ D.O.B. _____ Age _____

Email_____ School_____

T-shirt size (circle one): YS YM YL (Youth Sizes) S M L XL (Adult Sizes)

PARENT/GUARDIAN PERMISSION:

(Both parents must sign this permission form. If only one parent is available to sign, the parent signing must assume complete and absolute responsibility as set forth below)

We/I hereby grant permission for my child _____ to participate in the: Youth Soccer Program.

We/I represent that my child is physically fit and suffers from no health issue which would prevent him/her from participating in this activity. We/I will assume all responsibility and obligation for my child in case of injury or accident sustained during participation in this program. We/I release and hold harmless the Mt. Vernon Parks & Recreation Board, Metropolitan School District of Mt. Vernon, employees of the Mt. Vernon Parks Board, and all other paid and volunteer personnel from any and all liability, loss, damage, injury which may result or occur during the course of this sports program. We/I give permission for the Mt. Vernon Park & Recreation Department to use individual photographs and team photographs as the department sees fit, including but not limited to, print and internet publication. We/I will work together with the Mt. Vernon Park & Recreation Department and all persons involved in this sports program to build a fine program for all of the youths involved

_____	_____	_____
Date	Parent/Guardian Signature	Printed Name
_____	_____	_____
Date	Parent/Guardian Signature	Printed Name

Phone #'s main)_____ work)_____ emergency)_____

We encourage everyone to volunteer regardless of their knowledge of the sport. The success of the program depends upon the volunteers. The more volunteers - the more opportunities your child will have.

Will you please: Coach? yes no Assist Coach? yes no Coach Shirt Size: S M L XL

Comments:

_____

All weather updates will be posted on -- **www.facebook.com/MVParksandRec**

Rec. # _____ Date Rec'd _____ By _____