

Are you 5-13 years old and interested in playing spring soccer? Sign up at Driving Park to be a part of the spring season. The age divisions are: 5-6, 7-9, and 10-13. These are all co-ed teams. Conditioning and practices will start the week of March 25th, and games will start in the middle of April.

2014 DRIVING PARK SPRING SOCCER

1100 Rhoads Avenue
Columbus, OH 43206
(614) 645-3228

www.Columbusrecreandparks.gov



Registration Week:
March 18th-March 22nd
Season Starts:
Week of March 25th

Practice will be Tuesday and Thursdays 6pm-7pm
Games will be on Saturdays From 10am-2pm

*** Register in person at Driving Park during normal business hours.**
This program will cost \$10

COLUMBUS RECREATION AND PARKS
PARENTAL PERMISSION FORM



I, _____, my son / daughter, _____
(Print Parent or Guardian's Name) (Print Child's Name)
to participate with Staff, and the children from Driving Park
Recreation Leader Recreation Center / Playground
in ALL Spring Soccer Activities 2014 to be held at CRPD Designated Location (s)
(Activity) (Place)
on ALL Spring 2014 from 9:00 (A.M. / P.M.) to 3:00 (A.M. / P.M.).

TO BE SIGNED BY PARENT / GUARDIAN

I agree not to hold the City of Columbus, its leaders, counselors or sponsors liable for damage to property of participant (s) or, injury to participant (s) sustained by participation that results from the operation of this program / activity.

(Signature of Parent or Guardian) (Date)

(Telephone Number) (Emergency Contact Number)

COLUMBUS RECREATION AND PARKS DEPARTMENT
D. P. SOCCER REGISTRATION INFORMATION FORM
Driving Park Recreation

Date: _____
Last Name: _____ First Name: _____ M.I. _____
Address: _____ Apt. No.: _____
City: _____ State: _____ Zip Code: _____ Home Telephone: _____
Birth Date: ____/____/____ Age: _____ Other Telephone: _____
Emergency Contact Name: _____ Emergency Contact Telephone No.(s): _____
Email Address: _____
Emergency Medical Info. (allergies, diabetes, etc): _____

AGE DIVISIONS: (5-6) (7-9) (10-13)

SHIRT SIZES: YS YM YL AS AM AL AXL AXXL