

CITY OF BONNEY LAKE PRESENTS

# PEE WEE SPRING SOCCER

## FOR CHILDREN AGES 3 TO 6



**EMAIL FORM TO (preferred method)**  
**recreation@cobl.us**

Call in Visa/MC after submitting to  
complete registration:  
(253) 891-6500

**BRING IN**

Completed form & payment to:  
Bonney Lake Recreation  
At the Robert Miller Gym  
Sumner, WA 98390  
(behind Daffodil Valley Elementary)

**MAIL IN**

Send form and payment to:  
Recreation  
1202 Wood Avenue  
Sumner, WA 98390

**When:** Boys and girls ages 3 through 6 are eligible for this program. There are two coed age divisions: 3/4 and 5/6. Score is not kept and the emphasis of the program is on learning and having fun. Program runs exclusively on Saturdays; three practices will be held (April 20, 27 & May 4), followed by three games between May 11th through June 1<sup>st</sup>. Double-header possible for older ages. Coaches will sign up for practice times at the coaches' pre-season meeting. Game schedules will be provided prior to second practice.

We play rain or shine!

**Gear:** Players are required to have shin guards and athletic appropriate shoes (no open toes), tennis shoes are fine.

**Where:** Local fields

**Times:** Games will last around or about 40 minutes start times between 8:30AM and 1:30PM

**Cost:** \$60 per player (includes t-shirt) - \$69 for non-residents (out of Sumner-Bonney Lake School District).

**Registration Deadline is March 14, 2024 Late fee of \$10 after this date will be added if space available.**

**Volunteer Coaches Needed!! Coach's child plays for \$30 off!**

Participant Name: \_\_\_\_\_ Age: \_\_\_\_\_ Gender (please circle) M or F  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Parent/Guardian's Name: \_\_\_\_\_ Coach or Friend request (if any): \_\_\_\_\_  
If you would like Coach, please list your name and contact number: \_\_\_\_\_

**Please select size:**

Youth Extra Small \_\_\_\_\_ Youth Small \_\_\_\_\_ Youth Medium \_\_\_\_\_ Youth Large \_\_\_\_\_ Adult Small \_\_\_\_\_

I assume all risks and hazards of the conduct of the program and release from responsibility any person providing transportation to and from activities. In case of injury, I do hereby waive all claims of legal actions, financial or otherwise, against the City of Bonney Lake. In absence of signature, payment of fee and participation in the program shall constitute acceptance of the conditions set forth in the release. I grant full permission to use any photographs, video tapes, motion pictures, recordings, or any other records of this program for promotional purposes. The City of Bonney Lake do not discriminate based on sex, race, creed, religion, color, national origin, age, honorably discharged military veteran or military status, sexual orientation including gender expression or identity, the presence of any sensory, mental or physical disability, or the use of a trained guide dog or service animal used by a person with a disability in its programs or activities.

By signing below, I attest that I as a participant or as parent/guardian of a registrant/program participant, will not attend class or allow my child to attend class if I/we have any of the concerning symptoms noted below, or someone in our household has any concerning symptoms listed below, or has an exposure to a known positive Covid-19 case: Concerning symptoms disallowing participation is class/camp or program (per WSDOH guidelines): Cough, headache, shortness of breath, fever of 100.0 F or higher or a sense of having a fever, congestion or runny nose (not related to allergies), new loss of taste or smell, muscle or body aches, nausea, vomiting or diarrhea, chills, unusual fatigue or sore throat.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Program fee \$ \_\_\_\_\_

Please include any non-resident fees on this line --- Out of district \$ \_\_\_\_\_

**PW Soccer Spring 2024**

**TOTAL \$ \_\_\_\_\_**

VISA / MC # \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Exp. Date \_\_\_\_\_ / \_\_\_\_\_ / CVV \_\_\_\_\_