

Previous Edge Activity \_\_\_\_\_ PSDN \_\_\_\_\_ REC \_\_\_\_\_  
 REF \_\_\_\_\_ Internet/ Facebook \_\_\_\_\_ Offsite Event \_\_\_\_\_  
 Contact Info on File \_\_\_\_\_ And checked as current \_\_\_\_\_  
 /17 Amt Pd for THIS Activity: \$ \_\_\_\_\_ C.O.F. \$ \_\_\_\_\_  
 Date pd \_\_\_\_\_ Visa/MC \$ \_\_\_\_\_ Coupon \$ \_\_\_\_\_  
 DB \_\_\_\_\_ Conf email & xfer to folder \_\_\_\_\_  
 Customer # \_\_\_\_\_ HOW PD: Cash \$ \_\_\_\_\_ Check # \_\_\_\_\_ \$ \_\_\_\_\_  
 Form Cust # \_\_\_\_\_ Roster \_\_\_\_\_  
 Coupon and/or C.O.F. note \_\_\_\_\_  
 New \_\_\_\_\_ Returning \_\_\_\_\_  
 If part of larger payment: \$ \_\_\_\_\_  
 Processing Mgr: Jael Seth \_\_\_\_\_  
 Matt Phil Christian Pat \_\_\_\_\_



**SUMMER**  
**Kinder Kickers**



**Child Registration & Waiver Form (07/25/2017)**



**Follow us on Facebook!**  
www.facebook.com/TheEdgeSportsCenter

**Child's FIRST** Name \_\_\_\_\_ **LAST** Name \_\_\_\_\_ **AGE (3, 4, or 5)** \_\_\_\_\_  
**MUST Turn 3 BEFORE SESSION!**  
**Parent or Guardian FIRST** Name(s) \_\_\_\_\_ **LAST** Name (s) \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_  
 Primary Phone \_\_\_\_\_ Email Address \_\_\_\_\_

**CANCELLATIONS: There are no refunds for cancellations. If cancellation is made one week or more before start of session, the registration fee can be carried forward in full as a credit. Cancellations within one week of start of session, or after session has started, result in loss of registration fee.**

		Monday	Tues	Wed	Thursday	Friday
<b>Morning</b>	9 am					4 & 5 Year-olds
	10 am	3 & 4 Year-olds				3 & 4 Year-olds
	11 am	4 & 5 Year-olds				
<b>Afternoon</b>	12:30 pm				3 & 4 Year-olds	
<b>Evening</b>	5:30 pm			3, 4, & 5 Year-olds		

**AUGUST - SEPTEMBER**

**LATE SUMMER 2017**  
**6-week Session - 1 hr/wk \$60**  
 • Mon: Aug 28; Sep 11, 18, 25; Oct 2, 9  
**No class Sept 4: Labor Day**  
 • Wed: Aug 30; Sep 6, 13, 20, 27; Oct 4  
 • Thu: Aug 31; Sep 7, 14, 21, 28; Oct 5  
 • Fri: Sep 1, 8, 15, 22, 29; Oct 6



**OCTOBER - NOVEMBER**

**FALL 2017**  
**6-week Session - 1 hr/wk \$60**  
 • Mon: Oct 16, 23, 30; Nov 6, 13, 20  
 • Wed: Oct 11, 18, 25; Nov 1, 8, 15  
 • Thu: Oct 12, 19, 26; Nov 2, 9, 16  
 • Fri: Oct 13, 20, 27; Nov 3, 10, 17

**Registration is first-come, first-serve until classes are full. Please call to check availability**

**YOU MAY JOIN AT ANY TIME DURING THE SESSION IF THERE IS SPACE AVAILABLE!** If participant starts after the first week and signs up for **ALL** remaining weeks, cost is reduced - call for specifics. Otherwise, the single day rate is \$15. **NO DROP-INS - MUST CALL AHEAD!**

**Ask about our "Sports-themed" Birthday Parties!**

**Did you know that we also offer Pre-School Football, Baseball, Basketball, Lacrosse & Tennis Classes?**

**Liability Waiver** I hereby authorize the staff of The Edge Sports Center, LLC & the Kinder Kicker Instructors to act for the participant according to their best judgment in providing or arranging for emergency circumstances requiring medical attention. In consideration of the applicant being allowed to participate in the Kinder Kickers program, I acknowledge that I have had the opportunity to determine the nature of the activity and the manner in which it will be conducted and/or having waived the right to obtain such knowledge, do hereby assume all risks arising from or connected with said activity and release The Edge Sports Center, LLC, the owner of the facility, their employees and agents, from all liability of any kind or nature, whether caused in any way by negligence of the released parties or not, arising from the applicants participation in the league/clinic/camp/activity or presence on the premises.

**Permission to use Photographs & Video Footage:** I give my permission to The Edge Sports Center, LLC to use sports action or team photographs and/or video footage of the above named player in various Edge Sports Center, LLC marketing materials including, but not limited to, brochures, flyers, guides, DVDs & the Edge Sports Center, LLC website. I waive any claim to monetary compensation in any form from The Edge Sports Center, LLC for this usage.

I represent that I am the parent or legal guardian of the above named child and that I understand and agree to the above statements.  
 Signature \_\_\_\_\_ Printed Name \_\_\_\_\_ Date \_\_\_\_\_