



# Somerville Recreation

25 West End Avenue, Somerville, NJ 08876

(908) 704-6985

[www.somervillenj.org/recreation](http://www.somervillenj.org/recreation)

## **2018 FALL SOCCER LEAGUE INFORMATION**

**Leagues for youth entering grades 1<sup>st</sup> - 8<sup>th</sup> (September 2018), who reside or attend school in Somerville. TRAVEL PLAYERS ARE NOT ELIGIBLE. Teams play inter-town games with surrounding towns in a league administered by Bridgewater Recreation.**

**TEAMS:** Entry-level soccer program with local Recreation Departments, for youth in grades 1st – 8th. Players will be placed on teams according to grade. First come, first served. **Players will be waitlisted if a team is full or without a coach.**

**GAMES:** Games are played (weather permitting) on Saturdays from September-November in Bridgewater. Coaches will distribute schedules when they are released to the Recreation Department.

**PRACTICES:** Practices will begin early September. Practices are held one to two times per week on various Somerville fields. Coaches will contact their players with specifics when schedules are finalized.

**ATTENDANCE:** Although this is a recreational soccer program, Somerville Recreation does require commitment from its participants. Players are expected to arrive to practices and games on time. Any absences must be reported to coaches in advance.

**COACHES:** Volunteers are needed! New coaches must attend the Rutgers S.A.F.E.T.Y. Clinic and submit a fingerprint/background check. If interested, please call the Recreation Department.

**INCLEMENT WEATHER:** For game cancellations, please call 908-526-7107, or visit [www.bridgewaternj.gov](http://www.bridgewaternj.gov) (Bridgewater Recreation). Practice cancellations will be communicated through coaches via email.

Follow us on Facebook (@somervillerecreation) and Twitter (@somervillenjrec) for all the latest news and updates.

**COST: \$45**

**DEADLINE: AUGUST 1, 2018 AT 2:30PM**

**\*NO LATE REGISTRATIONS WILL BE ACCEPTED\***

# SOMERVILLE RECREATION 2018 FALL SOCCER REGISTRATION FORM

**\*\*JERSEYS ARE REQUIRED FOR ALL PARTICIPANTS. JERSEYS FROM PRIOR SEASONS ARE PERMITTED. \*\***



<b>Leagues (Grades 1<sup>st</sup>-8<sup>th</sup>)</b> _____	<b>Cost \$45</b>
<b>Jersey (If needed)</b> _____	<b>Cost \$15</b>
<b>Select size:</b>	
YM _____ YL _____ AS _____ AM _____ AL _____ AXL _____	

**Don't Forget!**  
Residents can register online 24/7 at <https://register.communitypass.net/somerville>

## REGISTRATION DEADLINE: AUGUST 1<sup>ST</sup> AT 2:30PM

Please print and return to: Somerville Recreation, 25 West End Avenue, Somerville, NJ 08876.  
Checks should be payable to Somerville Recreation. Register online, by mail, or in person, Mon-Fri 8:30-4:30.

PARTICIPANT \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ GRADE (2018-19) \_\_\_\_\_ SCHOOL \_\_\_\_\_

PARENT/GUARDIAN NAME \_\_\_\_\_

EMAIL (REQUIRED) \_\_\_\_\_

ADDRESS \_\_\_\_\_

HOME PHONE \_\_\_\_\_ MOBILE PHONE(S) \_\_\_\_\_

MEDICAL CONDITIONS (IF ANY) COACHES/INSTRUCTORS SHOULD KNOW ABOUT: \_\_\_\_\_

EMERGENCY CONTACT : \_\_\_\_\_ RELATIONSHIP TO PARTICIPANT \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

If the participant has individualized needs due to a disability, please check the following and someone will contact you regarding reasonable accommodations.

\_\_\_\_ Yes, I will need to be notified regarding special considerations for my child and I have provided the necessary three (3) weeks' notice prior to the beginning of the program(s).

**PROGRAM RELEASE:** I certify that the participant listed above is physically able to participate in the Somerville Recreation's programs. I hereby give permission for the participant listed to participate in the above named activity, as well as release the Borough of Somerville from any and all liability from injuries, which may occur while participating in any program.

**PHOTO RELEASE:** I, as the Parent/Guardian of the above named participant hereby authorize and consent to the use of his/her visual image by Somerville Recreation for appropriate purposes, including but not limited to: still photography, videotape, electronic and print publications and websites. I give this consent with no claim for payment. Check this box if you DO NOT consent to the Photo Release.

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

*Somerville Recreation reserves the right to limit registrations, and if necessary, cancel, alter and/or supplement programs.  
Note: Registration fees are non-refundable.*

Office use only: Date _____ Amount rec'd _____ Check # _____ Cash _____ CC _____
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