

WAMEGO RECREATION FALL PROGRAMS



Lil' Tykes Soccer Clinics
Introduces 3-5 year olds to soccer skills and new friends!
DEADLINE: UNTIL FULL



1st/2nd Grade Volleyball Clinic
Learn the fundamentals and proper techniques of volleyball.
DEADLINE: UNTIL FULL



3rd-6th Grade Volleyball
Play in 4-5 Saturday tournaments @ area schools. **DEADLINE: AUG 24**



1st-4th Grade Flag Football
A 6-week season played Sunday afternoons. **DEADLINE: AUG 24**



Co-Rec Volleyball
18 +, plays Sunday afternoon/ evenings.
DEADLINE: SEPT 28



Men's/Co-Rec Softball
Games played Monday and Sunday nights.
DEADLINE: AUG 17

Wamego Recreation Department

430 Lincoln Ave. / PO Box 86
www.wamego.org/recreation

(785) 456-8810
recreation@wamego.org



W A M E G O
RECREATION DEPARTMENT

WAMEGO RECREATION DEPARTMENT **FLAG FOOTBALL** REGISTRATION

Registration Deadline: Friday, August 24th by 5:00 PM

Fee: \$20.00 / child

Age Groups: 1st - 2nd grade, 3rd - 4th grade

Registration Deadline Policies:

No registration forms will be accepted after our registration deadline.

Forms must accompany correct payment to be accepted.

Mailed forms that arrive after the deadline will not be accepted (even if envelope is postmarked prior to deadline date)

If this form is returned to St. Marys City Hall - it must be received by 5:00 p.m. Thursday, August 23rd.

Register in person: 430 Lincoln Avenue (Wamego City Hall)

Register by mail: PO Box 86 Wamego, KS 66547 (***Please contact the WRD before the registration deadline to confirm we received your registration form by mail***)

Participants Name: _____ Age: _____ (As of May 1st) Grade: _____ Gender: _____

DOB: _____ / _____ / _____ (Birth Certificate required) E-Mail: _____

Address: _____ City/Zip: _____

Best phone number to be reached: _____ Team town placement preference: _____

Please select participant's shirt size:

YOUTH SIZE: SM ___ MED ___ LRG ___ / **ADULT SIZE:** SM ___ MED ___ LRG ___ X-LRG ___ XX-LRG ___

WOULD YOU LIKE TO COACH?

COACH SHIRT SIZE _____ / ASSISTANT SHIRT SIZE _____

YES! Coach Name _____ Phone _____ E-mail _____

YES! Assistant Name _____ Phone _____ E-mail _____

*Parents interested in coaching are subject to random background checks. WRD has the right to approve or reject any parent to serve as a coach for any or no reason.

ARE YOU INTERESTED IN SPONSORING?

YES! Business Name: _____ Shirt Color Preference: _____

Contact Person: _____ Phone Number: _____ Email: _____

Teams will be randomly selected. No special request will be guaranteed.

Waiver for Participant

In consideration of accepting this entry, I hereby for myself, my child, my heirs, executors and administrators, waiver and release any and all rights and claims for damages I or my child may have while participating in a Wamego Recreation Department program or sport. I assume all risks and hazards incidental to participation and I waive, release, resolve, indemnify and agree to hold harmless the Wamego Recreation Department, The City of Wamego and its organizers, sponsors, and supervisors.

NOTE: Parent or Legal Guardian must sign for any child entering a program.

PRINT _____
(Guardian's Name)

SIGNED _____ Date _____
(Guardian's Signature)





2018 ST. MARYS RECREATION DEPARTMENT VOLLEYBALL

Registration Deadline: Friday, August 24th by 5:00 P.M.

Fee: \$20.00/child within the city limits, \$25.00/child outside the city limits.

Age Groups: 3rd - 4th grade, 5th - 6th grade.

Teams will participate in 4 - 5 Saturday tournaments in the months of September and October.

Registration Deadline Policies:

Register in person: 200 South 7th Street (St. Marys City Hall) Register by mail: PO Box 130, St. Marys, KS 66536

No registration forms will be accepted after the registration deadline.

Forms must accompany correct payment to be accepted.

Mailed forms that arrive after the deadline will not accepted (even if envelope is postmarked prior to deadline date)

Participants Name: _____

Age: _____ (As of May 1st, 2017)

Gender: _____

Grade: _____

DOB: ____/____/____ (Birth Certificate required)

E-Mail: _____

Best phone number to be reached: _____

Address: _____

City/Zip: _____

Please select participant's shirt size:

YOUTH SIZE: SM ___ MED ___ LRG ___ / **ADULT SIZE:** SM ___ MED ___ LRG ___ X-LRG ___ XX-LRG ___

WOULD YOU LIKE TO COACH?

COACH SHIRT SIZE _____ / ASSISTANT SHIRT SIZE _____

YES! Coach Name _____

Phone _____

E-mail _____

YES! Assistant Name _____

Phone _____

E-mail _____

*Parents interested in coaching are subject to random background checks. SMRD has the right to approve or reject any parent to serve as a coach for any or no reason.

ARE YOU INTERESTED IN SPONSORING? (\$100.00 Sponsor Fee)

YES! Business Name: _____

Contact Person: _____

Shirt Color Preference: _____

Phone Number: _____

Email: _____

Teams will be randomly selected.

Waiver for Participant:

In consideration of accepting this entry, I hereby for myself, my child, my heirs, executors and administrators, waiver and release any and all rights and claims for damages I or my child may have while participating in a St. Marys Recreation Department program or sport. I assume all risks and hazards incidental to participation and I waive, release, resolve, indemnify and agree to hold harmless the St. Marys Recreation Department, The City of St. Marys and its organizers, sponsors, and supervisors.

NOTE: Parent or Legal Guardian must sign for any child entering a program.

PRINT _____

(Guardian's Name)

SIGNED _____

(Guardian's Signature)

Date _____

E-mail: mayhewjames13@gmail.com

Ph #: (785) 207-1023