JEFFERSON COUNTY PARKS AND RECREATION





- Our recreational league features ageappropriate play, equal playing time, building fundamentals and having fun!!
- Separate divisions for Pre-K (ages 4-5) through 7th grade.
- Fee includes -Tee-Shirt, game equipment, field preparation and maintenance, Referees (3rd grade and up)
- Practices are scheduled to begin mid-August. Coaches will contact families with details/practice schedules.
- League games will be played on Sundays starting at 1 pm at HJ Carroll & Irondale Parks, beginning Sunday, September 8th to end of October
- Every team will play one game on a Wednesday evening under the lights at Memorial Field.

www.countyrec.com

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Fees Registration Closed when grade divisions are full. June 2nd – July 18th Early Bird Registration \$65.00

July 19th – August 3 Regular Registration \$75.00
August 4th and later Late Registration/Waitlist \$80.00

*Tax is included. Fees are non-refundable.

\$5 or more to you	ir payment. Contribution \$
Cash Total	
Check Total	CK#
Please make checks pa	ayable to Jefferson County Parks and Recreation

Youth scholarships: Support local youth by adding

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Register online (*credit card payment; a non- refundable 3% credit card fee will apply*)

Registration

HOW TO REGISTER

ONLINE PAYMENT OPTION!!

(Credit Card payment—online only) Register online at CountyRec.com and view the CART to check out with a major credit card (a non- refundable 3% credit card fee will apply). **OR** Register in person at the Rec Center in Uptown Port Townsend or at Jefferson County Public Works, 623 Sheridan St, Port Townsend – *check or cash ONLY*. **OR** Mail a check with your completed registration form to Jefferson County Public Works, 623 Sheridan St., Port Townsend, WA 98368. *check or cash ONLY*.

*Help us plan & sign up early! When a grade division is full, we will close registration and participants will be placed on a waitlist. This could occur before August 3rd!

Volui

Email:

Volunteer to Coach!

Volunteer coaches are at the center of the program. Have fun while helping to nurture young soccer players.

Name	Shirt Size				
Phone					

**All Parks and Recreation volunteers working with youth must complete a voluntary background check form. Please go to www.countyrec.com to download a background check form or stop by the Public Works office 623 Sheridan St. in PT. All Jefferson County Parks and Recreation Volunteers must submit this form at least two weeks prior to volunteering.

Volunteer Coach's Meeting Dates

Pre-K/Kinder Wednesday, August 6th 5:30 pm 1-2 grades Wednesday, August 6th 5:30 pm 3-4 grades Wednesday, August 6th 5:30 pm 5-7 grades Wednesday, August 6th 5:30 pm

<u>Location:</u> Jefferson County Rec Center, 620 Tyler Street, Port Townsend.

We will have your team rosters, equipment, and go over all of the relevant information for the upcoming soccer season!! Please mark your calendars. We look forward to seeing you at the meetings!!

For more information: www.countyrec.com

Call 360-385-2221 or email Chris Macklin cmacklin@co.jefferson.wa.us or Sam Miller smiller@co.jefferson.wa.us



ASSUMPTION OF RISK, RELEASE OF LIABILITY AND CONSENT



Jefferson County Parks & Rec Fall Youth Soccer 2025 - Page 2

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Pa	rticipant First Name	Last _		Age	Grade	(in Fall 25)	M F_	_ Birthday
Ма	ailing Address			City				Zip	
1. 1	Parent/Guardian: First Na	me		Last					
2. I	Parent/Guardian: First Na	me		Last					
Но	me Phone	Alternate F	Phone		E-	mail			
Em	nergency Contact				F	hone			
Alle	ergies/Special Needs	_ If yes, describe							
Pa	rticipant's T-Shirt Size:	Youth: XS	S M L	XL <u>Ad</u>	ult: S	M L	XL	XXL	
 2. 	ASSI All participants are advised the sports, games, drills, climbing lives. This risk of injury cannot decision whether to engage in program in no way obligates at On behalf of my minor child,	at Jefferson County I g, hiking, swimming, ot be wholly relieved any particular activit anyone to engage in a	Parks and Recror running), property that forms purpose the control of the control	reation Programs resent a risk of intive measures, want of the overall by do not feel the	s (JCPR) may njury higher t whether restri l program sha ey can accom	v involve son than that wh ctive rules, a all be entirel plish.	me strentich peotraining by the pa	nuous physi ple normall , equipmen articipant's	ical activity. Some (such a ly face in their everyday t or personal discipline. Tl . Participation in the
	including serious injury, disable the nature and extent of these and knowingly assume all succhild's) participation in the JC ability, or the ability of my missing the control of the con	pility or death that ari risks with officials of th risks, whether spec CPR Program. I under	se from partici f the JCPR in o ifically known stand that I m	ipation in the JC order to inform and unknown. ust report any expenses the contract of the JC or the JC o	PR Program. myself fully of I accordingly disting medical	I acknowled on this subject assume full al, physical	dge that ct. Base and so or ment	I have had d on that fulle le responsibile al condition	full opportunity to discuss all understanding, I freely bility for my (or my minor n which may affect my
3.	On behalf of myself and on be employees, officers, voluntees personal injury, disability or of the alleged injuries or damage law.	rs or agents of those eleath, resulting from	entities, includi my or my mind	ing as well any to or child's involv	hird-party sp ement in any	onsors of JC aspect of th	CPR but ne JCPR	not limited Program.	l to damage to property, This release applies wheth
4.	To the fullest extent allowed to fkin, hereby agree to indemparticipation in the JCPR Programmer against any of the indemnified	nify and hold harmles gram. This undertakir	ss all the partieng to provide in	es released in Ar ndemnity shall a	ticle 3 hereof apply to the fu	from and a	gainst a	ny and all l	iabilities arising from my
5.	On behalf of myself and on be Jefferson County Parks and R 623 Sheridan Street in Port To	ec website (www.cou							
part	I HAVE READ THIS AS AT BY MY SIGNATURE I GI ticipate in the JCPR Program un ich this consent is given is calle	VE UP CERTAIN R nder the terms as set f	IGHTS I MIG forth in this As	HT OTHERWI	SE HAVE UI sk, Release of	NDER LAW Liability ar	7. I here	by consent	to allow my child to
	Signature of Parent or G	uardian		Date					
	Signature of Latent of O	uur diuii	РНОТОG	RAPH – VIDEO	CONSENT				
					1 11			GDD :	

I hereby grant permission for myself or my minor child to be photographed or videotaped, without compensation, by JCPR, understanding that the same is intended for publication by print media, INTERNET newspaper, television, video or motion picture. I additionally consent to the use of my name in connection with the publication of photographs/video taken of me.

Signature of Parent or Guardian	Date

Please find below our Concussion Information Form. Please go over this information with your participant(s) Thank You, Rec Staff



Concussion Information Sheet

A concussion is a brain injury and all brain injuries are serious. They are caused by a bump, blow, or jolt to the head, or by a blow to another part of the body with the force transmitted to the head. They can range from mild to severe and can disrupt the way the brain normally works. Even though most concussions are mild, all concussions are potentially serious and may result in complications including prolonged brain damage and death if not recognized and managed properly. In other words, even a "ding" or a bump on the head can be serious. You can't see a concussion and most sports concussions occur without loss of consciousness. Signs and symptoms of concussion may show up right after the injury or can take hours or days to fully appear. If your child reports any symptoms of concussion, or if you notice the symptoms or signs of concussion yourself, seek medical attention right away.

- Headaches
- "Pressure in head"
- Nausea or vomiting
- Neck pain
- Balance problems or dizziness
- Blurred, double, or fuzzy vision
- Sensitivity to light or noise
- Feeling sluggish or slowed down
- Feeling foggy or groggy
- Drowsiness
- Change in sleep patterns

- Amnesia
- "Don't feel right"
- Fatigue or low energy
- Sadness
- Nervousness or anxiety
- Irritability
- More emotional
- Confusion
- Concentration or memory problems (forgetting game plays)
- Repeating the same question/comment

- Appears dazed
- Vacant facial expression
- Confused about assignment
- Forgets plays
- Is unsure of game, score, or opponent
- Moves clumsily or displays in-coordination
- Answers questions slowly

- Slurred speech
- Shows behavior or personality changes
- Can't recall events prior to hit
- Can't recall events after hit
- Seizures or convulsions
- Any change in typical behavior or personality
- Loses consciousness

What can happen if my child keeps on playing with a concussion or returns to soon?

Adapted from the CDC and the 3rd International Conference on Concussion in Sport Document created 6/15/2009

Concussion Information Sheet

Athletes with the signs and symptoms of concussion should be removed from play immediately. Continuing to play with the signs and symptoms of a concussion leaves the young athlete especially vulnerable to greater injury. There is an increased risk of significant damage from a concussion for a period of time after that concussion occurs, particularly if the athlete suffers another concussion before completely recovering from the first one. This can lead to prolonged recovery, or even to severe brain swelling (second impact syndrome) with devastating and even fatal consequences. It is well known that adolescent or teenage athlete will often under report symptoms of injuries. And concussions are no different. As a result, education of administrators, Coaches, parents and students is the key for student-athlete's safety.

Over

If you think your child has suffered a concussion

Any athlete even suspected of suffering a concussion should be removed from the game or practice immediately. No athlete may return to activity after an apparent head injury or concussion, regardless of how mild it seems or how quickly symptoms clear, without medical clearance. Close observation of the athlete should continue for several hours. The new "Zackery Lystedt Law" in Washington now requires the consistent and uniform implementation of long and well-established return to play concussion guidelines that have been recommended for several years:

"a youth athlete who is suspected of sustaining a concussion or head injury in a practice or game shall be removed from competition at that time"

and

"...may not return to play until the athlete is evaluated by a licensed heath care provider trained in the evaluation and management of concussion and received written clearance to return to play from that health care provider".

You should also inform your child's coach if you think that your child may have a concussion Remember its better to miss one game than miss the whole season. And when in doubt, the athlete sits out.

For current and up-to-date information on concussions you can go to:

https://www.cdc.gov/headsup/?CDC_AAref_Val=https://www.cdc.gov/headsup/youthsports/index.html

Adapted from the CDC and the 3rd International Conference on Concussion in Sport

Document created 6/15/2009