



Office: 1423 Chase Ct. Carmel, IN 46032  
 Phone: (317) 580-5900  
 Fax: (317) 580-5905  
 www.indylilkickers.com



## Fall 2008

### Class Dates

Classes start September 2

Last Class November 24

### Memberships

\$15 annual membership

Class	#Classes	\$ per Class	Cost
Bunnies, Thumpers	12	\$11	\$132
Cottontails, Hoppers, Jack Rabbits, Big Feet	12	\$12.50	\$150

Circle the class and time that you want to attend

Class	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Bunnies 18-24 Months (Adult & Child)			10:30 4:30		10:30	8:30 9:30
Thumpers 24-30 Months (Adult & Child)		11:30	11:30 4:30		10:30	8:30 9:30 10:30
Cottontails 2 ½ - 3 ½ Years (Adult & Child)	5:30	10:30	12:30		11:30	8:30 9:30
Hoppers 3 - 4 Year old Beginning	4:30	10:30	10:30 4:30	4:30	10:30 12:30	8:30 9:30 10:30
Jack Rabbits 3 - 4 Year old Intermediate	5:30	11:30	11:30 5:30	4:30	11:30	8:30 9:30 10:30
Big Feet 5 - 6 Year old Beginning	4:30	12:30	4:30			9:30 10:30
Micro League 4/5 4 - 5 Year old		12:30	12:30 5:30	5:30	12:30	8:30 9:30 10:30
Micro League 6/7 6 - 7 Year old			5:30	5:30		10:30
Advanced Micro League (Prior Lil' Kickers Required)				4/5 6:30 6/7 6:30		4/5 10:30 6/7 10:30

Child's Name: \_\_\_\_\_ Parent's Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Day Phone #: \_\_\_\_\_ Child's Date of Birth: \_\_\_\_\_ Gender: (Male/Female)

Email: \_\_\_\_\_

Credit Card Number (Master Card/Visa/Disc.): \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Unless another form of payment has been received, this credit card will automatically be charged. You must be paid in full to register.

Waiver of Liability: I acknowledge that Off The Wall Sports, LLC may compile address labels and lists and may utilize photographs of the named individual. I consent to these uses of my name, address and likeness and hereby waive all rights to compensation for their use in the promotion and/or operation of Off The Wall Sports, LLC.

To induce Off The Wall Sports, LLC to accept registration and permit participation in Off The Wall Sports, LLC sports programs, I hereby give my consent and agree to release, indemnify and hold harmless Off The Wall Sports, LLC, its officers, officials, coaches, employees and representatives from any claim arising out of injury to the named individual. I also hold harmless Off The Wall Sports, LLC, its officers, officials, coaches, employees and representatives from and against any claim arising out of injuries or conditions caused by or aggravated by my refusal to obtain medical treatment based on religious or philosophical beliefs or otherwise.

I understand that as a participant in Off The Wall Sports, LLC sporting events that I must abide by all rules, regulations and philosophies of Off The Wall Sports, LLC.

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