



# Limon Recreation Department Youth Soccer K-2nd 2025



The youth soccer program is sponsored by the Limon Recreation Department and will begin on March 26, 2025 and end on April 23, 2025. The program will be for boys and girls in grades Kindergarten through 2nd. We will be playing on Wednesday afternoons **5:15 p.m.-6:15 p.m.** All practices will be held on the new youth football field that is located at 400 2<sup>nd</sup> Ave.

There will be a **\$30.00 fee** for those participating in the program. **Payment should be made to the Limon Recreation Department and is due to the Town Hall by March 10.** No one will be allowed to play without registering. Each child will receive a T-Shirt for participating in the program.

The first two practices the participants will be taught the fundamentals of soccer; passing, dribbling, shooting etc. The third practice participants will be divided into teams and games will be played. Please wear appropriate clothing for the weather conditions in the spring. If you have questions please feel free to contact me anytime.

I will need parent volunteers to help coach the teams. If I do not get enough volunteer coaches or participants the program will be cancelled. If you are a parent interested in helping with the program please contact the Limon Recreation Department @ 775-2346. Make sure to check Facebook-Town of Limon page for program cancellations due to weather.

Jason Bandy  
Recreation Director  
719-892-0919

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Liability Release Form

I hereby certify that my child, \_\_\_\_\_ has permission to participate in the recreation activity, Youth Soccer Program, sponsored by the Limon Recreation Department. I realize there is some risk of injury while being involved in this program, and I will not hold the Town of Limon, or any of their agents or volunteers liable for such injury. Any emergency medical attention the supervisor of this activity deems necessary may be given by a competent provider, if the guardian listed below cannot be contacted immediately.

Participant's Name: \_\_\_\_\_ Grade \_\_\_\_\_ D.O.B. \_\_\_\_\_

Parent or Guardian's Signature: \_\_\_\_\_ Date \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Address: \_\_\_\_\_

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

Physical Address: \_\_\_\_\_

Shirt Size Please Circle: Youth or Adult                      Small                      Medium                      Large

PARENT VOLUNTEER \_\_\_\_\_