



Office: 1423 Chase Ct. Carmel, IN 46032
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 www.indylilkickers.com



Fall 2009

Class Dates:
 Starts Sept 14th
 Ends Nov 16st

Location:

INDOORS

The Strike Zone
 12550 Promise Creek Lane
 Fishers, IN 46038

Costs:

10 Weeks for \$125
 Mail, fax, or drop off payment & form
 to the Lil Kickers main office.

Circle the class and time that you want to attend

Class	Monday
Bunnies 18-24 Months (Adult & Child)	10:30
Thumpers 24-30 Months (Adult & Child)	10:30
Cottontails 2 ½ - 3 ½ Years (Adult & Child)	11:30
Hoppers 3 - 4 Year old Beginning	12:30
Jack Rabbits 3 - 4 Year old Intermediate	12:30
Big Feet 5 - 6 Year old Beginning	1:30
Micro League 4/5 4 - 5 Year old Intermediate	1:30

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 _____