

2026 LIL' KICKERS SOCCER CLINIC

Boys & Girls Ages 3, 4, and 5 (not yet in kindergarten)

Program Goals: Building self-esteem, basic skills, respect, positive competition, and sportsmanship.

Requirements: This is a family oriented program requiring all children registered to have a parent or guardian present to participate with the child.

Location: #2 Park Dr, Roxana, IL 62084 The field to the right of the Roxana Pool.

When: **THURSDAY EVENINGS:** April 16, 23, 30 and May 7. This is a four week program.
Session A Thursday 5 - 5:45 pm Class size 20*
Session B Thursday 6 - 6:45 pm Class size 20*
*Classes are decided on a first come first serve basis

Equipment: All participants will receive a t-shirt with their name printed on the back.
Shin guards are required. Cleats are not required.

Fee & Registration Deadline : \$35.00 April 3rd or each session full at 20 registered

Registration: Participants may register online, by mail or in person at:



Make checks payable to:
ROXANA RECREATION
Rox-Arena, Roxana Park
#2 Park Dr.
Roxana, IL 62084
Or sign up online @

Signupville.com/Roxana



Please indicate your Session Preference: A _____ B _____ **2026 Spring Lil' Kickers Soccer**

T-Shirt Size: YXS(4-5) YS(6-8) YM(10-12) YL(14-16) AS AM

Name: _____ **M / F** **D.O.B.** ____/____/____ **Age:** _____

Address: _____ **City:** _____ **Phone:** _____

Email Address: _____ **School:** _____

Medical Conditions? _____

Emergency Contact: _____ **Relationship:** _____ **Phone:** _____

I, the undersigned parent or legal guardian of the above named minor, do agree to abide by the Parents Code of Ethics and hereby consent and agree that the above named minor may participate in the Roxana Recreation program. I understand and acknowledge that there are certain risks of physical injury associated with my child's participation in the above named program which may occur through no fault of any volunteer, participant, employee, or officer of the Roxana Recreation League, the Village of Roxana, and/or any other sponsor or party. The Roxana Recreation program reserves the right to use any pictures taken for publication.

Signature of Parent or Guardian _____ **Date:** _____

Office Use Only:

Date Paid: _____ **Amount Paid \$** _____ **Received By** _____ **Receipt #** _____