



NEW CENTURY FIELDHOUSE – SPRING MEN’S 5 on 5 FLAG FOOTBALL

551 New Century Parkway – New Century, KS 66031

www.newcenturyfieldhouse.com (913) 826-2850

Come play at the brand new facility in New Century, near Gardner. New Century Fieldhouse has a state of the art Sprinturf field measuring 100’ x 190’. The New Century Fieldhouse is climate controlled, making it the optimum place to play this spring. A Thursday night league and Sunday morning league will be offered. Teams will play six games and then be seeded into playoffs. Game times range from 6:30 – 10:30 pm on Thursday night and 8:00 am – noon on Sunday. Games will begin on March 25 and March 29. No games will be played on Easter Sunday, April 8.

6 games + playoffs - \$375	Registration Deadline: March 16	
League Code	Start Date	Day of League
8195	March 25	Sunday morning
8196	March 29	Thursday evening

Register by mail to New Century Fieldhouse, 551 New Century Pkwy., New Century, KS 66031; fax to (913) 826-2863, phone in to (913) 826-2853 between 8:30 am – 5:00 pm, or walk in to above address between 8:30 am – 5:00 pm, Monday - Friday.



JCPRD PROGRAM REGISTRATION FORM
 Return completed form with fee. Make check payable to: JCPRD
 NCF 551 New Century Pkwy.
 New Century, KS 66031

OFFICE USE ONLY:				
Payment	CA	CK	MC	VS DS
Registrar	_____			
Date	_____			

(PRINT) Manager’s Name	Team Name	League Code	League Title	Date	Day	Time	Fee
			Men’s 5 on 5 FF			Varies	\$375

NOTE: Please keep a record of dates and times of classes. Confirmations are not sent.

All returned checks are subject to a \$20 service charge!

WAIVER STATEMENT: “The undersigned states that he/she understands that the Johnson County Park and Recreation District is not and shall not be responsible for or liable for any illness, or injury to person or damage to property resulting from the program in which the undersigned is enrolling or being enrolled or from his/her participating in said program, and the participant and the undersigned, if the participant is a minor or under other legal disability, hereby forever releases and holds harmless the said Johnson County Park and Recreation District, its employees, agents and representatives from any and all claims of any kind that the participant, or the undersigned or their respective heirs, executors, administrators, or assigns may have or claim to have resulting from participation in said program. Also, the undersigned and the participant authorize the Johnson County Park and Recreation District to use at its discretion any photographs(s) (black/white or color) and or video participant while participating in the program and waive any and all claims that the participant or undersigned or their heirs, executors, administrators, or assigns may have or claim to have resulting from such photograph(s) or reproductions thereof.”

Please charge all fees to: MC VS DS

Card Number: _____ Expires: _____ CID#: _____
 (Your 3-digit number Credit Card Identification Code (CID) is located on the back of your credit card on the signature line after the card number or last four digits of your credit card number. **We cannot process your registration or hold a placement without this information.**)

Name as Printed on Charge Card: _____

Refunds are only given when camps are filled, or cancelled by the District.
 Please allow 2 to 3 weeks for refunds.

JCPRD is committed to making reasonable accommodations as required by the Americans With Disabilities Act. Requests must be made two weeks or ten working days prior to the start of the program. Please indicate what accommodations are needed: _____

X _____ (_____) (_____) _____
 Signature Home Phone Work/Cell Phone

Mailing Address: _____
 Street (Apt. #) City State Zip

Email Address: _____