WAYS TO REGISTER

In-Person

Croissant Park
245 W. Park Dr
Fort Lauderdale, FL 33315
(954) 828-6154
American Express, MasterCard, or Visa accepted.

Online

www.fortlauderdale.gov/register

Activity #152990
Ages 4-5: Activity Section 25
Ages 6-7: Activity Section 26
Ages 8-9: Activity Section 27
Ages 10-11: Activity Section 28

You will need your household ID and password. Forgot your ID and password? Please call the Parks and Recreation Registration Office at (954) 828-PARK (7275).

Once you register, you have the option of changing your ID and password, as well as implementing security questions.

If you would like this publication in an alternative format, please contact (954) 828-7275 or parksinfo@fortlauderdale.gov.

PARKS & RECREATION
City of Fort Lauderdale

CROISSANT PARK
Youth Soccer
Registration Guide

Croissant Park
245 W. Park Drive
Fort Lauderdale, FL 33315
(954) 828-6154
parks.fortlauderdale.gov/athletics

PARKS & RECREATION
City of Fort Lauderdale

REGISTRATION BEGINS
October 20, 2025

PRACTICE BEGINS
December 15, 2025

GAMES BEGIN
January 10, 2026

CROISSANT PARK LEAGUE OFFICE
Patrick Oxen
(954) 828-6154
poxen@fortlauderdale.gov

Age Divisions
Ages 4-5
Ages 6-7
Ages 8-9
Ages 10-11

Registration Fees	
Resident	Non-Resident
$85	$127.50

Registration Includes

- Jersey, shorts, and socks
- Eight (8) regular season games
- Individual awards for each player
- End-of-the-season party

Practices will begin the week of December 15, 2025. You will be notified by your team coach on the specific days and times. Practices meet once a week, Tuesday through Thursday between 5:30 to 8 p.m.

Games will begin January 10, 2026 and will be played once a week. A detailed schedule of games will be made available at a later date.

Volunteer Coaches Needed!

Positive adult role models are needed for a successful youth sports program. INTERESTED? Please call (954) 828-6154 and check the proper box on the registration form. Each coach is allocated 50 percent off one family member registration per season. The 50 percent off the registration fee is based upon a refund and is applied directly to your City of Fort Lauderdale household account at the end of the season.

City of Fort Lauderdale Parks and Recreation Department

Youth Soccer Individual Registration

PLEASE PRINT CLEARLY ☐ **Male** ☐ **Female**

Registrant's Name:_____ Date of Birth: _____
(First) (Last) (Middle Initial)

Address:_____ City:_____ State:___ Zip Code:_____

Parent/Guardian Name(s):_____

Cell/Home Phone (1):_____ Cell/Home Phone (2):_____

Email (1): _____ Email (2): _____

School Child Attends: _____

☐ **I am interested in Coaching a Team** ☐ **I am interested in being an Assistant Coach**

Coach/Asst. Name: _____ Contact #: _____ Email: _____

AGE DIVISIONS: (Please Check one) **ALL TEAMS ARE CO-ED**

Ages 4-5 ☐ **Ages 6-7** ☐ **Ages 8-9** ☐ **Ages 10-11** ☐

Coach/Practice Requests: _____

Photo Release: I hereby grant authorization to the City of Fort Lauderdale to use photographs of myself and/or my child for publicity purposes.

Insurance Responsibility: In consideration of this registration in the activities provided by the City of Fort Lauderdale the participant or the participant's guardian understands that participation may subject to a certain degree of risk to injury and that the City will not be liable for medical expenses or other claims for damages, based upon property damage or personal injury as a result of these activities. Any insurance protection must be obtained by the participant.

Medical Release: If my child should become ill or injured and I cannot be reached, I give permission for my child to be treated by a physician in an emergency. ☐ Yes ☐ No

I have read and understand and agree that I will not hold the City of Fort Lauderdale liable for any personal injury or property damage that I or my child may suffer as a result of participation in the activities including bus trips provided by the City.

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