



SIGN UP FOR MINIKICKER PROGRAMS WITH CHALLENGER SPORTS IN 9 EASY STEPS!

1. Go to www.minikickersoccer.com
2. Click on the “Search for a program” button (in orange).



3. Search by zip code, state/province or school/organization name. Click on the “Search for a Program” button (in red) when you are ready.



Welcome to our MiniKickers registration page! Enter your Postal code and search radius to find a location in your area!

1 Search Radius REQUIRED - OR - **Search State** REQUIRED

Radius * of Postal Code

State * - OR - Province *

2 Search Name OPTIONAL

SEARCH FOR A PROGRAM

4. Select your desired program.

Search our events/products and add to your shopping cart				
Program Type	Select a Program	Location	Program Dates	Distance
MiniKickers	The Goddard School of Aurora - Monday's - Ages 3-5	The Goddard school of Aurora School Field 23905 East Arapahoe Road Aurora, CO 80016	3/31/2014 - 5/15/2014	4.1 mi
MiniKickers	A Child's touch - Tuesday's- Ages 3-5	A Child's Touch Soccer Field 9141 Poze Blvd. Thornton, CO 80229	4/1/2014 - 5/13/2014	4.1 mi

5. Click **View/Register** on your selected session.

	Session Name	Min Age	Max Age	Start Time	End Time	Price
View/Register	Tuesday's - Ages 3-5 (MiniKickers)	3	3	9:30 AM	10:15 AM	\$80.00
View/Register	Tuesday's - Ages 3-5 (MiniKickers)	4	4	10:30 AM	11:15 AM	\$80.00

6. Next click “Continue” and then click “Register for an Account”. Proceed to complete the required fields and then enter your address on the next page. (There is a ‘guest’ checkout option if you prefer.)

* Username

* Password

* Re-enter password

* Email address

* First Name

* Last Name

* Phone number

Mobile Phone number

Phone Carrier

7. You will then input your participant's details and Select **Uniform size** or **Backpack package** or **Lenny the Lion** and then click **Add to cart**.

Begin registration for MiniKicker Cubs 2-3 yrs (Thursdays)

Choose a Saved Participant	Participant Information
<input checked="" type="radio"/> Carl Davey (Age: 0)	*ParticipantFirst Name <input type="text" value="Carl"/>
<input type="radio"/> Carl Davey (Age: 5)	*ParticipantLast Name <input type="text" value="Davey"/>
	*Birth Date <input type="text" value="02/04/2010"/>
	*Gender <input type="text" value="Male"/> <input type="button" value="v"/>
Please list any medical conditions or allergies we need to know about	<input type="text"/>
Player(s) to group with	<input type="text"/>

MiniKicker Uniform Package



MiniKicker package includes Jersey, shorts and ball. If you are a returning MiniKicker feel free to choose a backpack or our brand new Lenny the Lion soft toy instead!

Price: Free

Size

YS

[Return to Opening Search Page](#)

[Add to Cart](#)

You will be presented with an option to purchase items from our Soccer Shop, after reviewing this click **checkout**.

8. Proceed to the forms page. You will need to enter the emergency contact information for your child and answer 2 other compulsory questions. Click **“Save & Continue”** and move on.

[Additional Items](#) **Forms** [Disclaimers](#) [Payment](#) [Process Payment](#)

Registration is nearly complete so thank you for your patience! Please take a quick look for any questions below that we may need you to answer before you can move on by hitting 'Save and Continue'

[Save & Continue](#)

Form 1 of 1: Order form

Emergency Contact Name	<input type="text"/>
Emergency Contact Number	<input type="text"/>
How did you hear about us?	<input type="text" value="(Choose One)"/> ▼
Would you be interested in hearing more about becoming a host family this year?	<input type="text" value="No"/> ▼

Read our General Liability Statement and then check the box if you agree to the terms. Click **“Next”** to move on.

General Liability



I hereby release Challenger Sports and any hosting organization from any and all claims and liability of any kind of personal injury or property damage due to participation in this camp. I understand that participation in sports camps include physical contact and certify that my child is in good health and able to participate in all activities. I agree to notify the coaching staff of any preexisting medical or psychological conditions. If attention is required for illness or injury, I give my permission to a staff member for such care. I give my consent for my child to be photographed or filmed while participating in camp activities and for the resulting images to be used by Challenger Sports for promotional purposes. If returned unpaid I authorize my account to be electronically debited for both the check amount and returned check fee.

Cancellations due to any reason at least ten days prior to camp are subject to a \$40 cancellation fee. No refunds will be given for cancellations within ten days of camp. Refunds will not be issued retroactively for campers who miss periods of the camp due to illness, injury or conflicting activities. Should a camp not run a full refund will be made within 30 days.

I agree to the above statement

[Back](#)

[Next](#)

9. You will then be led to the payment page. Please complete this page with your card details and then proceed to the process payment screen.

You will receive an email confirmation upon receipt with valuable information about your program. Please keep this to hand. If you experience any problems searching or registering for a program, please call Carol Horvath on 1-800-878-2167 Ext 239 (toll free).

Thanks,

The Challenger Sports Team