



The Family YMCA of Northwest Illinois presents:

# Outdoor Soccer

It's time for Outdoor Soccer! Players are taught Outdoor Soccer fundamentals and given the opportunity to demonstrate their learned skills in games. All games will be held at the YMCA on Saturday mornings. Coaches schedule their own team practices. For more information contact the YMCA at 815-235-9622.



**AGE/LEAGUES:** Pre-K thru 4th Grade

**DATES TO KNOW:**

July 26th	Registration Begins
August 19th	Registration Ends
August 24th	Coaches Meeting 6:30 PM @ YMCA
September 11	Meet the Team Day (7 week season)
October 23rd	Last Day of Sports

**FEES:**

YMCA Members \$35.00	Non-Members: \$55.00
(2nd Child \$30.00)	(2nd Child \$50.00)
<b>(Optional) Youth Sports Reversible Jersey = \$10.00</b>	

**PARENTS NAME:** \_\_\_\_\_ **BIRTHDAY:** \_\_\_\_\_  
(MM/DD/YYYY)

**EMAIL ADDRESS:** \_\_\_\_\_

**SOCCER PLAYER'S NAME:** \_\_\_\_\_ **GRADE:** \_\_\_\_\_ **BOY GIRL**  
(circle one)

**BIRTHDAY:** \_\_\_\_\_ (MM/DD/YYYY) **PHONE:** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_ **CITY:** \_\_\_\_\_

- I assume all risk(s) and hazards incidental to the conduct of this program and for the transportation to and from the program. I hereby authorize the YMCA to obtain medical treatment for my child in the event that parent(s) and the emergency contact cannot be reached.
- I support the YMCA Youth Sports philosophy which is based on participation, fun, physical fitness and health, skill development, teamwork, fair play, family involvement, and volunteer leadership.

**SIGNATURE:** Parent/Guardian \_\_\_\_\_ **PHONE:** \_\_\_\_\_

\*\*\*\*\* ATTENTION: PARENT/GUARDIAN/FRIENDS \*\*\*\*\*

Yes, I am willing to participate as a volunteer in support of the YMCA Youth Outdoor Soccer

(All Coaches **MUST** provide a current email address for communication purposes)

\_\_\_\_ Coach                      \_\_\_\_ Assistant Coach                      \_\_\_\_ Referee

**NAME:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**EMAIL ADDRESS**

\_\_\_\_\_

<b>Outdoor Soccer</b>
Amount Pd: _____
Staff received by _____