



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY



**MARION FAMILY YMCA
SPRING SOCCER 2019**

It's that time again, **Soccer Season!**

Program focuses on teaching the players the basic skills, teamwork, and sportsmanship. Practice and games location will be at the MARION FAMILY YMCA! Games will be played on Saturdays. *Practice will be held once a week at each team coach's discretion.*

Early Bird Special: \$10 off registration on or before February 23.

Cannot be combined with scholarship or sibling discount

Season Dates: April 20—June 1, 2019

Ages: 3-4, 5-6, 7-9, and 10-13

Member Fee: \$30 per child Non-Member Fee: \$60 per child

Price includes: Reversible soccer jersey and awards. *Pictures may be purchased for an additional fee.*

****Team jerseys are the same as previous sports/seasons****

Registration Deadline: April 15, 2019

Late Registrations: April 16—19, 2019

Late registrations submitted between April 16-19, will be reviewed and accepted on a space-available basis with an additional \$10 late fee. You will be notified by the Program Coordinator if your registration was accepted with your team and season information.

Meet the Coach / Complete Paperwork: April 20, 2019

Ages 3-4 @ 9:00 am / Ages 5-6 @ 10:00 am

Ages 7-9 @ 11:00 am / Ages 10-13 @ 12:00 pm

Scholarships Available! Bring your tax return to the Y Service Center at the time of registration for immediate approval. Families with annual income of \$35,000 or less may qualify for a \$15 reduction in fee. This can be used in place of but not combined with Early Bird or Sibling Discount.

Questions? Please call or e-mail Program Coordinator, Nicole Brown P 740-725-9622 E nbrown@marionfamilyymca.org

Number of Years Soccer Experience: 0 1 2 3 4 5 6 7+

Jersey Size: YS YM YL AS AM AL NONE

Jerseys remain the same in each season and sport

Name _____ Age _____ D.O.B _____

Address _____ email _____

Phone Number _____ Parent's Name _____

WOULD YOU BE WILLING TO COACH/ASSIST? YES NO

COACH NAME: _____ **COACH PHONE NUMBER:** _____

We will try to honor requests. However, we do not guarantee coach, teammate or practice day requests.

Name of Teammate requested: _____ Name of Coach requested: _____

Practice Day(s) requested (circle): Mon Tues Wed Thurs Fri

OFFICE USE ONLY Late Registration Date/Time Received: _____