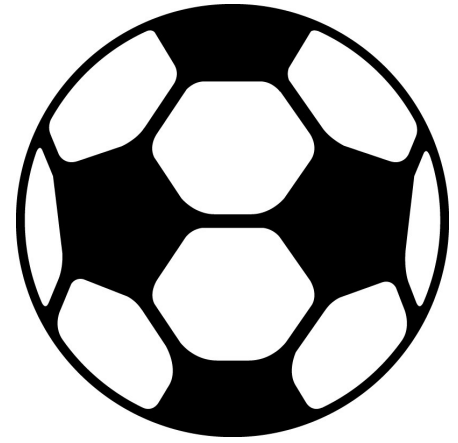




FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY



MARION FAMILY YMCA SOCCER FALL 2019

It's that time again, **Soccer Season!** Program focuses on teaching the players the basic skills, teamwork & sportsmanship. Games will be played on Saturdays at the Marion Family YMCA. *Practice will be held once a week at each team coach's discretion.*

Early Bird Special: \$ 10 off registration on or before July 20, 2019.

Cannot be combined with scholarship or sibling discount

Season Dates: September 14—October 26, 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 jersey and award. *Pictures may be purchased for an additional fee.*

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

Registration Deadline: September 9, 2019

Late Registrations: September 10—13, 2019

Late registrations submitted between September 10—13, 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-and-Greet: September 14, 2019

Ages 3-4 @ 10:00 am / Ages 5-6 @ 10:30 am

Ages 7-9 @ 11:00am / Ages 10-13 @ 11:30am

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

Marion Family YMCA Registration

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

Shirt Size: YS YM YL AS AM AL NONE (jersey discount)

Jerseys remain the same in each season and sport

Name _____ Age _____ D.O.B _____

Address _____ Email _____

Phone Number _____ Parent's Name _____

DO YOU KNOW SOMEONE WILLING TO COACH/ASSIST? YES NO

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

We will try to honor requests. However, we DO NOT guarantee coach or teammate.

Name of Coach requested: _____ Name of Teammate requested (Limit 1 only): _____

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

OFFICE USE ONLY Late Registration Date/Time Received: _____