

# Y SOCCER™

We build strong kids, strong families, strong communities.

Volunteer  
Coaches  
Needed

## 3 and 4 year old 2010 Small Fry Soccer Kaufman County YMCA

Kaufman County YMCA is offering a session of Small Fry Soccer! This program is for boys and girls ages 3 & 4 who would love to see what it's all about with out having to play on a "team" in a league. The session lasts for six weeks and each group of up to ten kids will be assigned a "coach" to lead them through learning skills, followed by scrimmage games. **The session ends with an end-of-season celebration and a trophy!** It is a great way for your child to learn the sport of soccer, meet some new friends, and have LOT'S OF FUN!!!!

Late registration does not guarantee placement on a team

Financial Assistance Available

Season Begins: Saturday, March 13th at 10am  
Last day to Register is March 1st  
Cost: \$30 YMCA Family Members; \$40 Non-Members  
Coaches meeting March 4th 2010 KC YMCA @ 7:30pm  
Terrell- 10-10:45am  
Sessions will take place in and Terrell at Ben Gill Park

Mission: To put Christian values into practice through programs that build a healthy spirit, mind and body for

## Kaufman County YMCA Small Fry Soccer

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Male \_\_\_\_\_ Female \_\_\_\_\_ Age \_\_\_\_\_

Date of Birth \_\_\_\_\_ I would like to be on the same team as: \_\_\_\_\_

**Terrell Location: \_\_\_\_\_ 10-10:45am**

\_\_\_\_\_

Father's Name \_\_\_\_\_

Mother's Name \_\_\_\_\_

Emergency Contact Phone \_\_\_\_\_

I would like to volunteer to help with this program. I am willing to be a:

Head Coach \_\_\_\_\_ Assistant Coach \_\_\_\_\_

\* Coaches Meeting will be March 4th @ 7:30pm at the Kaufman County YMCA\*

In the event that emergency medical attention is deemed necessary. I give YMCA permission to provide first aid and/or transport to the nearest emergency medical facility. I also give permission for necessary emergency treatment by a physician and/or hospital/clinic. By my signature and of my free will, I do hereby agree to indemnify and hold harmless the YMCA from any and all claims and demands, cost or expenses arising out of any injuries or damages sustained by myself or any party I am responsible to or for. I give the YMCA permission to use my child's picture for promotional purposes.

### Credits/Refund Policy

REFUNDS ARE ONLY GIVEN WHEN THE YMCA CANCELS CLASSES OR PROGRAMS. No refunds will be given after the season begins. I understand there will be a \$10 service fee for any refund request other than for medical reasons. Credit will be applied to future courses or programs if a participant withdraws due to a medical reason accompanied by a physician's note. No credit will be given after 75% of the program has been held. Credits will be prorated to the number of classes attended.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Email: \_\_\_\_\_