

SOCCER

YMCA of San Benito County, 351 Tres Pinos Road, Suite A-201, Hollister, CA 95023 831-637-



CO-ED SOCCER LEAGUE FOR GRADES K-5TH

Program Vision: To encourage a love for the game and companionship between players through the teaching of skills, development of positive attitudes about fair play, teamwork and reinforcement of the YMCA core values of caring, honesty, respect and responsibility.

Registration Dates: begin August 1st

League Dates:

Practice Start— week of **September 13th** (practice times & location are determined by coaches)

First Game—Saturday, September 25th (most games will be held on Saturdays; games against the Monterey YMCA and Salinas YMCA are probable)

End of Season—tentative November 20th

Program Fee: \$75

YMCA Annual Membership: \$30 Individual Program Membership or \$55 Family Program Membership

Contact Information: Kristie Agan, Regional Program Director kagan@ymcacentralcoast.org

YMCA Soccer League K-5 Registration Form Fall 2010

Return this form with payment in full (including program and membership fees) to:

YMCA of San Benito County, 351 Tres Pinos Road, Suite A-201, Hollister, CA 95023 Phone: 831-637-8600 Fax: 831-637-8636

Player's Name

Birth Date

Gender

Age & Grade in School

Parent Name

Phone #

E mail

Address

Emergency Contact: Name _____

Phone # _____

I agree that I and/or my child will cooperate and conform with the directions and instructions of the volunteers and staff involved in the program. I hereby give the YMCA permission to use their judgment in obtaining medical service for myself and/or my child and I give permission to the physician selected by the YMCA personnel to render medical treatment necessary and appropriate. In the event that my child is injured as a result of his/her participation in this program, including transportation to and from such activities, I agree not to hold responsible and/or liable the YMCA or any of its agents or employees. Payment of any medical, hospital, or related costs and expenses must be paid by any insurance or benefit plan of mine or my spouse.

Yes **No** **Photo Authorization:** The YMCA staff has authorization to photograph and use me/my child for YMCA promotional material.

Volunteers Needed. Please check one Coach

Assistant Coach

Team Parent

Signature of Parent/Guardian _____

Date: _____

Please be advised that the Hollister School District does not make any representation or warranty as to the quality of services, merchandise, or opinions associated with this agency or individual, (vendor, service, etc.) The purpose of this flyer (posting, newsletter, etc.) is to provide general information to the community only, and it is not recommended that anyone act on the information contained herein with out further independent inquiry.

**Y BELONG.
BE STRONG.**

Financial Assistance is available
for families who qualify.

