

Soccer Kids America



Register Online Now!
www.soccerkidsamerica.org
 For more info contact
Karleen 619-977-0474 or
soccerkidsamerica@yahoo.com



November Soccer Camp Ages 5-12 Years

Kids will have fun learning and improving in their skill level with professional coaches



November 23-25
(Thanksgiving Break)

9:00 am - Noon

Location: Golden Hill Recreation Center
 2600 Golf Course Drive
 San Diego, CA 92102

Cost: \$35 per day (register for 1 day or all 3)

Futsal Indoor Soccer League Ages 5-17 Years

Registration Deadline December 12

Game Date: Saturdays-8 week league
 Begins January 16

Location: Municipal Gym-in Balboa Park
 next to Air & Space Museum
 2111 Pan American Plaza
 San Diego, CA 92101

Cost: \$85 includes team shirt
 Parents who coach receive free registration

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Register online at www.soccerkidsamerica.org or
mail registration form with payment to: Soccer Kids America 1765 Garnet Avenue #3, San Diego, CA 92109
For more information contact Karleen 619-977-0474 or soccerkidsamerica@yahoo.com

Child's Name: _____ Age: _____ Birth date: _____
 Child's Gender: Male Female School Child Attends _____
 Parent/Guardian Name: _____ Coach/Team Name: _____
 Home Address: _____
 Home Phone: _____ Work Phone: _____ Cell Phone: _____
 Emergency Contact Name & Number (If parent can't be reached): _____
 Parent/Guardian Email Address: _____ Jersey size (for futsal only) _____
 Select days/program : Soccer Camp Nov. 23 Nov. 24 Nov. 25 Futsal Indoor Soccer League
 Payment type:
 Cash Check/Money Order payable to Soccer Kids America Total Fee \$ _____

I the guardian of the above named player, a minor, and the above named player agree to the following: (1) To abide by the rules of Soccer Kids of America. Recognizing the possibility of injury associated with soccer and in consideration for Soccer Kids of America accepting the registrant for its soccer program and activities, I hereby release, discharge and/or otherwise indemnify Soccer Kids of America, their employees and associated personnel including the owners of fields and facilities utilized for the programs against any claim by or on behalf of the registrant as a result of the registrant's participation in the programs. (2) I hereby give my consent for emergency medical care prescribed by a duly licensed doctor. This care may be given under any circumstances which are necessary to preserve the life, limb, or well being of my dependent. (3) To hereby give my consent to Soccer Kids of America to take photographs, video recordings and/or sound recordings of the above named player for Soccer Kids of America educational and promotional purposes in manuals, flyers, on the world wide web or in other publications. **Please list any allergies, Reviewed by: District Communications**
 have in regards to your child's participation:

Parent/Guardian Signature: _____

APPROVED
 By 115248 at 3:23 pm, Oct 30, 2015



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