



**Family YMCA of Northwest Illinois**

**YOUTH INDOOR SOCCER League**

Beginning Saturday, February 25th, 2012 the Family YMCA of Northwest Illinois will be offering a Youth Indoor Soccer League for all youth in Grades Pre-Kindergarten – 6<sup>th</sup> grade. Indoor Soccer has become more and more popular at all levels of play. For the young player who is interested in soccer, the indoor game provides an excellent opportunity to develop quickness, stamina, good reflexes and coordination. Not to mention that it is a lot of fun. For more information contact the YMCA at 235-9622.

**Age/Leagues:** Pre-K (4yrs+)- All leagues are CO-ED  
Kindergarten:  
1<sup>st</sup> & 2<sup>nd</sup>; 3<sup>rd</sup> & 4<sup>th</sup>; 5<sup>th</sup> & 6<sup>th</sup>

**Dates to Know:**

January 2	Registration Begins
<b>February 18</b>	<b>Registration Ends</b>
February 20	Coaches Mtg./6:30 PM at YMCA
February 25	Meet the Team Practice Day
March 17	No Games (Home Show)

**FEES:** YMCA Members \$20.00 Non-Members: \$40.00  
(Second Child - \$15.00) (Second Child – \$35.00)  
**Youth Sports Reversible Shirt = \$10.00**

**PLAYER'S NAME** \_\_\_\_\_ **GRADE:** \_\_\_\_\_ **BOY GIRL** (circle one)

**BIRTHDAY:** \_\_\_\_\_ (MM/DD/YYYY) **PHONE:** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_ **CITY:** \_\_\_\_\_

1. I assume all risk(s) and hazards incidental to the conduct of this program and for the transportation to and from the program. I hereby authorize the YMCA to obtain medical treatment for my child in the event that parent(s) and the emergency contact cannot be reached.

2. I support the YMCA Youth Sports philosophy which is based on participation, fun, physical fitness and health, skill development, teamwork, fair play, family involvement, and volunteer leadership.

**SIGNATURE:** Parent/Guardian \_\_\_\_\_ **PHONE:** \_\_\_\_\_

\*\*\*\*\* ATTENTION: PARENT/GUARDIAN/FRIENDS \*\*\*\*\*

Yes, I am willing to participate as a volunteer in support of this YMCA Indoor Soccer League. (All Coaches MUST attend the mandatory coaches meeting on Monday, February 20<sup>th</sup> at 6:30 PM at the YMCA)

\_\_\_\_\_ Coach \_\_\_\_\_ Assistant Coach \_\_\_\_\_ Referee

**NAME:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

Please return to Family YMCA of Northwest Illinois amount paid \_\_\_\_\_  
2998 W. Pearl City Road receipt # \_\_\_\_\_  
Freeport, IL 61032  
815.235.9622

**\*This is a YMCA event and is not affiliated with District #145.**