FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Soccer Spring Session

The Riverfront Family YMCA is offering outdoor soccer for boys and girls ages 4 through 11. The league will consist of 3 divisions:

Rookies	**Ages 4-5 Years**
Winners	**Ages 6-8 Years**
Champions	**Ages 9-11 Years**

The league will run from May 6th through June 29th. Teams will practice one night a week and play their games on Saturday mornings or early afternoons. All practices and games will be held at Sill Middle School. For more information please contact Derek Mercer at DerekM@akronymca.org or visit us online at www.akronymca.org

Fees

YMCA Member - **$40**
Program Member (Non-member) - **$55**

Important Dates!

Registration Deadline:
April 29, 2013
First week of Practice:
May 6, 2013
First day of Games:
May 18, 2013

Riverfront Family YMCA
544 Broad Blvd.
Cuyahoga Falls, OH 44223
330-923-9622

akronymca.org

The Y strives to make programs and membership available to all. Financial assistance may be available to those who qualify.

PARTNERS WITH YOUTH
ANNUAL GIVING CAMPAIGN

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

Connect with us!

Name: _____

Rookies (4-5) ___ Winners (6-8) ___ Champions (9-11) ___

Gender: Male _____ Female _____

Birth Date: _____ Age: _____ Phone: _____

Parents Name: _____ Parents Birthday: _____

Email Address: _____

Street Address: _____

City: _____ Zip: _____

Payment: (check one)
YMCA Member $40 _____
Non-Member (Program Member) $55 _____

Players Shirt Size: (check one)
___ Youth Small ___ Adult Small
___ Youth Medium ___ Adult Medium
___ Youth Large ___ Adult Large

Would your business/company be interested in sponsoring a team? _____

Volunteer coaches are the heart of YMCA Programs!

I am willing to volunteer as a:
Coach _____ Asst. Coach _____ Referee _____

Coaches Phone # _____

Coaches Email: _____

Coaches Shirt Size: AM AL XL XXL XXXL

I hereby release The Riverfront Family YMCA, and any person associated with the YMCA Sports Program for claims of damage, actions and whatsoever in any manner arising or growing out of my child's participation in the YMCA Sports Program.

_____ _____
Parent / Guardian Signature Date

* This Form must be completed and returned to the YMCA with payment.
If you have any questions please contact Derek Mercer at 330-923-9622