



U5/U6 Juniors & Micro Soccer

Winter Indoor Sessions

Session Dates

- Session I: Monday, November 2, 2009 thru Tuesday, December 8, 2009 (6 weeks) \$125
No practice November 23rd or November 24th
- Session II: Monday, January 4, 2010 thru Tuesday, February 9, 2010 (6 weeks) \$125
No practice January 18th - may attend January 19th
- Session III: Monday, February 22, 2010 thru Tuesday, March 30, 2010 (6 weeks) \$125

Times & Location

5:30 pm — 6:30 pm at Donges Bay School

Monday _____ Tuesday _____

Pick one day to participate.

Space is limited to 25 players per night.

Last Name _____ First Name _____

Date of Birth _____ Age _____

Address _____

City _____ Zip _____

Email _____

Mother _____ Phone _____ Cell _____

Father _____ Phone _____ Cell _____

Current Allergy and/or Medical Information

I, the parent/guardian of the registrant, a minor, agree that I and the registrant will abide by the rules of the United States Youth Soccer Association (USYSA), its affiliated organizations and sponsors. Recognizing the possibility of injury associated with soccer and in consideration for the USYSA accepting the registrant for its soccer programs and activities ("the programs"), I hereby release, discharge and/or otherwise indemnify the USYSA, including Mequon Soccer Club Inc., its affiliated organizations and sponsors, their employees and associated personnel, including the owners of the fields and facilities utilized for all programs, against any claim by or on behalf of the registrant as a result of the registrant's participation in the programs and/or being transported to or from the same, which transportation I hereby authorized.

As the parent/guardian of the above named player(s), I hereby give consent for emergency medical care prescribed by a duly licensed doctor of medicine or doctor of dentistry. This care may be given under whatever conditions are necessary to preserve the life, the limb or well-being of my dependent.

Parent/guardian _____ Date _____

What to wear: Loose clothes (appropriate for weather), shin guards, shoes. New players will receive a Mequon Soccer Club t-shirt.

What to bring: #3 soccer ball & water bottle (both labeled)

Cancellations: Due to weather and/or gym availability, consult Club web site. Every attempt will be made to give as much notice as possible.

Mail registration form & payment to:
 Mequon Soccer Club
 U5/U6 & Micro Soccer
 Box 114
 10936 North Port Washington Road
 Mequon, WI 53092

Mequon Soccer Club maintains a No Refund Policy.

For Micro questions and on-line information go to mequonsoccerclub.com

11/17/2009 lec

OFFICIAL USE ONLY	CHECK AMOUNT	NO.	DATE RECEIVED
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