

NWUnited FC Presents

(Revised: February 13)

iSoccer Skill Training for Recreation Players U7-U10



FOUR SUNDAYS: FEBRUARY 26 TO MARCH 18, 2012

- Foot skills and ball control. See www.iSoccer.org.
- \$30 for the the four 75-minute clinic/training sessions.
- NWUnited top trainers: Gary Warman, Geoff Martin, Christian Warman
- Two starting times: (You will be assigned to one or the other.)
 - 12:30pm to 1:45pm
 - 1:45pm to 3:00pm.
- YMCA's Bakerview Sports Center in Mount Vernon
- **Pre-register:** 360-466-4152 (Bob Raymond) or nwunited.communications@wavecable.com

Player Name: _____ **Date of Birth:** _____

2011 Soccer Activities: _____

Parent/Guardian: _____

Address: _____ City: _____ Zip: _____

Phone: Home: _____ Cell: _____

Best Email: _____

Waiver and Release: I give permission for my child to participate in the 2012 NWUnited Indoor Program. I understand that soccer is a sport in which serious injuries occur. I warrant that my child has no disabilities or special health considerations that prevent him/her from participating in physical activities including soccer matches. I grant NWUnited FC and its representatives permission to seek emergency medical care for my child. I, for myself, my child, our heirs, executors and administrators, waive, release and forever discharge NWUnited FC, Skagit Valley Youth Soccer Association, and the YMCA from any and all liability, claims and causes of action arising from or related to any loss, personal injury or property damage that may be sustained as a result of participation this activity during the 2011/12 seasonal year.

Parent/Guardian Signature

(Date)

**Checks Payable to "NWUnited FC". Mail form and check to:
NWUnited FC; PO Box 577; Mount Vernon, WA 98273**

NWUnited Use Only

Date: _____

Amount: _____

Check # _____