

# Avon Youth Summer Soccer 2017 (Boys & Girls)

Registration: Wednesday, May 17<sup>th</sup> from 7:00 - 8:00 PM

AVON HIGH SCHOOL CAFETERIA

No forms will be accepted at the Town Hall before May 17<sup>th</sup>

**NO FORMS WILL BE ACCEPTED AFTER JUNE 16<sup>TH</sup> 4:00PM**

The Avon Youth Summer Soccer Program is open to youth entering Kindergarten and no older than entering 6<sup>th</sup> grade for the 2017-2018 school year. The K-2 program will follow a Micro Soccer format (skills & drills).

**COST:** \$15.00/child OR \$40.00/family of 3 or more members (payment due at registration)

**DATES:** July 3<sup>rd</sup> – July 27<sup>th</sup> Mondays and Wednesdays

**PROGRAM TIMES & LOCATIONS:** K-2 Lake Road Practice Fields (K: 6:30-7:30) (1-2: 6:30-8:00)

3-6 Lake Road Practice Fields from 6:30-8:00

**EQUIPMENT:** Must provide own shin guards, water bottle and age appropriate soccer ball

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\*\*\*Please fill out one form PER FAMILY. Use additional forms, if necessary\*\*\*

Parent/Guardian: \_\_\_\_\_ Phone (H): \_\_\_\_\_ Cell: \_\_\_\_\_

Street Address: \_\_\_\_\_ City, Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Emergency Contact & Phone Number: \_\_\_\_\_

**Please volunteer: ( ) Coach** \*\*\*We need volunteers to keep the program running – Thank You!\*\*\*

T-shirt sizes: YS, YM, YL, YXL, AS, AM, AL

Name: \_\_\_\_\_ M F DOB: \_\_/\_\_/\_\_ Age: \_\_\_\_ Grade Sept. '17: \_\_\_\_ T-shirt Size \_\_\_\_\_

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Medical Insurance: \_\_\_\_\_ Policy/ID#: \_\_\_\_\_

Please describe any physical limitations, allergies or medical concerns for your child:  
\_\_\_\_\_

I/We the parents or guardians of the participant in the Avon Summer Soccer Program, give permission for my son/daughter to participate in any and all activities. To the best of my knowledge, my child/children is/are physically and mentally fit to participate in this program. Recognizing the possibility of physical injury associated with this program, I hereby release, discharge and otherwise indemnify Avon Youth Recreation, affiliated municipalities, employees and associated personnel, including the owners of the facility, against any claim by or on behalf of the registrant as a result of the registrant's participation in this program whether the result of negligence or for any other cause

**Signature of Parent/Guardian Required:** \_\_\_\_\_

**Total Payment: \$\_\_\_\_\_ Checks Payable: AVON RECREATION, Check# \_\_\_\_\_ Cash \_\_\_\_\_**

Sponsored by Town of Avon Recreation Program, 23 Genesee Street, Avon, New York 14414

Questions or comments email Town of Avon Recreation at [toarec@frontier.com](mailto:toarec@frontier.com)

Board Members: Kim McDowell, Allison Hayes, Heather Burke, Emily Cosimano, Kelly Montague

[www.avon-ny.org](http://www.avon-ny.org)