



FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Winter SOCCER LEAGUE

LEARN — PLAY — COMPETE



League Format:

7v7 Competitive Rec League with 9 players per roster

Games are 25 minute Halves with 5 minute Halftime

Dates:

Location: Games Held at

SLO High School
1499 San Luis Drive
San Luis Obispo, Ca 93401

December 9th–March 4th

Games Saturdays & Sundays 11am–4pm

Practices TBD

Tournament March 3rd & 4th

Registration & Costs: (Includes Long Sleeve Shirt)

REGISTER ONLINE <http://sloymca.org/Program-Details/Winter-Soccer-League> OR IN PERSON AT THE SLO COUNTY YMCA

Registration 10/27-11/30.....\$90

\$25 program membership fee if not already YMCA member

Divisions:

3rd & 4th Grade Girls

3rd & 4th Grade Boys

5th & 6th Grade Girls

5th & 6th Grade Boys

We are looking for Volunteer Coaches and Referees! FOR MORE INFORMATION ABOUT THESE OPPORTUNITIES CHECK OUT SLOYMCA.ORG!

Questions?

Visit: SLO COUNTY YMCA
1020 Southwood Dive
San Luis Obispo, CA 93401

Contact: Keegan Draper
kdraper@sloymca.org
(805) 543-8235



FOR YOUTH DEVELOPMENT*
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Invierno LIGA DE FUTBOL

APRENDER - JUGAR - COMPETIR



Formato de la liga:

7v7 Competitive Rec League con 9 jugadores por roster

Los juegos son mitades de 25 minutos con 5 minutos de medio tiempo

Fechas:

9 de Diciembre al 4 de Marzo

Ubicación: Juegos celebrados en

SLO High School
1499 San Luis Drive
San Luis Obispo, Ca
93401

Juegos los Sábados y Domingos
de 11 a.m. a 4 p.m.

Prácticas por determinar

Torneo 3 y 4 de Marzo

Registro y Costos: (Incluye camisa de manga larga)

REGÍSTRESE EN LÍNEA <https://www.sloymca.org/Program-Details/Winter-Soccer-League> O EN PERSONA EN LA YMCA DEL CONDADO DE SLO

Inscripción 10/27- 11/30 \$ 90

Cuota de membresía del programa de \$25 si aún no es un YMCA miembro

Divisiones:

3° & 4° Grados Niñas

3° & 4° Grados Niños

5° & 6° Grados Niñas

5° & 6° Grados Niños

¡Estamos buscando entrenadores voluntarios y árbitros! PARA OBTENER MÁS INFORMACIÓN ACERCA DE ESTAS OPORTUNIDADES ¡COMPRUEBE SLOYMCA.ORG!

Preguntas?

Visita: SLO COUNTY YMCA
1020 Southwood Dive
San Luis Obispo, CA 93401

Contacto: Keegan Draper
kdraper@sloymca.org
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Winter SOCCER LEAGUE 2017-18

Child's Last Name _____ First Name _____ MI _____

Sex: **M** **F** Birth Date _____ / _____ / _____ Age _____ School _____ Grade _____

Skill Level: Beginner Intermediate Advanced Years Played: _____ Shirt Size: _____

Primary Guardian Last Name _____ First Name _____ Birth Date _____ / _____ / _____

Relationship to Child _____ Address _____ City _____ Zip _____

Primary Guardian Home Phone# _____ Business Phone # _____

Email _____ (Program updates sent via email)

Secondary Guardian Last Name _____ First Name _____ Birth Date _____ / _____ / _____

Relationship to Child _____ Address _____ City _____ Zip _____

Secondary Guardian Home Phone# _____ Business Phone # _____

Email _____ (Program updates sent via email)

Parents, how can you help us? Sponsor Coach Asst. Coach Ref

SLO Youth Basketball 2017 Fees

Please return this form & your payment to: SLO County YMCA, Attn: Sports, 1020 Southwood Dr., San Luis Obispo, CA 93401

Fees	Total Cost
Registration: 11/1/17 - 11/30/17	\$90
Donation <input type="checkbox"/> Program Donation - Any amount <input type="checkbox"/> Financial Assistance Program - Any amount	\$ _____
Annual Program Enrollment Fee: (if not already a YMCA member, must pay the annual enrollment fee to become one)	\$25
Total Cost	

NOTES: _____

SLO County YMCA Release of Liability Agreement (must be signed)

Waiver and Release of Liability for A Minor

1. I am the parent or legal guardian of _____ (the "Minor") and I am duly authorized to agree to this Waiver and Release of Liability on behalf of both the Minor and me. 2. With my consent and approval, which I hereby grant and acknowledge, the Minor wishes to participate in one or more activity, program, course, sport, game or event (collectively, the "Activities") sponsored by the San Luis Obispo County YMCA (the "Y"). 3. In consideration for the Y permitting the Minor to participate in any of the Activities, I hereby agree to the following: I hereby represent and promise that the Minor is in good health and is physically and psychologically fit and qualified to engage safely in any and all Activities for which the Minor may be signed up to participate. b. I acknowledge that I am aware that, despite all precautions, there may be a significant risk of injury and/or death from the Activities in which the Minor participates. Nevertheless, it is my considered decision to permit the Minor to participate in the Activities and to assume all risk and responsibility for any bodily injury, death or property damage resulting from that participation, regardless of the cause or causes thereof. c. I HEREBY RELEASE, WAIVE AND FOREVER DISCHARGE the Y and any and all other sponsoring or cosponsoring individuals, agencies, companies, organizations or other entities, along with their employees, agents, representatives, directors, officers, and volunteers (collectively, the "Releasees") from any and all liability to the Minor, or to me, or to either of our nexts of kin, assigns or heirs, based on any claimed injury, loss or damage sustained by the Minor or me in the course of the Minor's preparing to participate, or participating, in the Activities, whether caused by the sole and exclusive negligence of the Releasees or otherwise. d. I HEREBY AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS the Releasees and each of them from any loss, liability, damage or cost they may incur due to the Minor's participation, or preparation to participate, in any of the Activities, or the presence by the Minor or me in, upon or about the premises where the Activities take place, or other premises occupied by the Releasees. e. I hereby consent to any and all emergency medical treatment for the Minor which, in the good-faith discretion of any of the Releasees, may be deemed necessary or appropriate for the benefit or protection of the Minor. I also waive and release any claim of fault or liability against the Releasees in connection therewith, and agree and accept that I will bear sole financial responsibility for any and all costs or expenses incurred, including medical transportation. f. I am aware and acknowledge that the Minor or I might be photographed while the Minor is preparing for or participating in the Activities, or while the Minor or I are on any of the Releasees' premises in relation thereto, and I hereby state that, except in locker rooms, rest rooms and shower areas, neither the Minor nor I have an expectation of privacy with regard to being photographed there, and that I hereby consent to and authorize the taking and use of such photographs, and any uses of the Minor's or my likeness, in whatever ways the Releasees deem appropriate, in their absolute discretion. g. I acknowledge that the Y sponsors the Activities and realize and accept that NO MEDICAL INSURANCE IS PROVIDED. 4. I have read and voluntarily signed this waiver and release of liability.

Name of Releasor (Printed)

Date

Signature of Releasor

Please list any medical concerns or limitations: _____