2016 WINTER INDOOR SOCCER PROGRAM @ High Point Regional High School's Main Gym

Cut-off date for winter registration is December 3, 2015 to avoid paying late fee!

REGISTRATION FORM

- Improve your soccer skills
- Train with HP's Championship Coaching Staff
- Open to Children age 5 through 14 (No high school students)
- Session dates:
 - 0 1/3, 1/10, 1/17, 1/24, 1/31, 2/14, 2/21, 2/28, 3/6, 3/13,
 - o Make Up dates: 3/20, 4/3
- Winter Soccer Fee: \$100.00 per person \$20 late fee after December 3rd
- Checks payable to "The Soccer EDGE"
- · Mailed to: 299 Pidgeon Hill Rd, Sussex NJ 07461
- Fee includes, t-shirt, trainer, facility fees, Project Graduation Donation

Program Overview

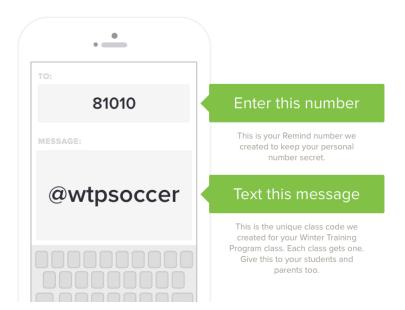
<u>K to Grade 4 Program</u>: This program is designed as a developmental and skills improvement program with a focus on having <u>FUN</u> and is structured to improve a player's ability and advancement. **Program Time**: 2:45pm to 3:40pm

<u>Grades 5-8 Program</u>: This program introduces players to futsal, and focuses on developing individual ball handling skills, 1 v 1 play, and passing. **Program Time**: 3:45pm to 4:40pm

- Participants are expected to wear shin guards, socks, sneakers, gym shorts, soccer shorts or sweat pants. No cleats.
- Bringing water.
- Questions: email kfenlon67@gmail.com or call 973-534-3141
- Sign up for REMIND via your cell phone to get all Winter Indoor Soccer Program Announcements



Instructions for students and parents to join Winter
Training Program





High Point Regional High Point Regional High School Winter Indoor Soccer Training (Waiver, Release and Hold Harmless Agreement)

l,	, the undersigned, affirm that my child					
Copper Trainin	og of High D	oint Dogional H	igh Coh	is participating vo	luntarily in: W	inter Indoor
Soccer Trainii	ng at High P	oint Regional Hi	ign Scho	DOI.		
•		int and agree, or under, or throug		of myself and my h s follows:	eirs, assigns,	and any
of which I may could occur to damages, or had these risks in and from ever with this activitiance an annumative all claim High School, and (Released Pawhich arise duthe Released harmless from reasonable at Released Parthrough me) in costs, damage I have careful	y not fully aper of others or marm, which include, but a liter as well a liter. High Points against Hand/or its or resulting or resulting or resulting or resulting as a re	preciate) and the property of	nat injury t and vol result fro , the pos ing out on h Schoo l carry po nal High nts, affilia ges, loss cipation ges, cos ation cos s or suits Release during of faiver, Ro	ve noted activity inverse death, property death, property definition my child's particles is ibility of accident of participation in the strongly recommenders on a health and a School, the trusted ates, employees, of ses or claims, whether the activity. I release to indemnify and health and expenses (incompared and expenses) in the activity and health and expenses and expenses in the activity and health and expenses and expenses and expenses and expenses or result from my parelease and Hold Hames and Hames and Hold Hames and Hold Hames and Hold Hames and	amage or other ks of ay injuried in the correct while end or illness while ends that each accident insures of High Point Released and forewood Released eluding but not encurred by an elaiming by, under any losses, articipation in the sof and the sof encurred by an elaiming by, under any losses, articipation in the sof and the sof encurred by an elaiming by, under any losses, articipation in the sof encurred by an elaiming by, under any losses, articipation in the sof encurred by an elaiming by, under any losses, articipation in the sof encurred by an elaiming by, under any losses, articipation in the sof encurred by an elaiming by, under any losses, articipation in the sof encurred by an elaiming by, under any losses, articipation in the sof encurred by any elaiming by an	er harm es, activity. e traveling to tivity involved participant rance. I nt Regional or insurers unknown, ver discharge I Parties I limited to y of the nder or liabilities, the activity.
Signature of Parent or Guardian						
Parent or Guardian Cell Phone Number						
Child's Date of Birth						
		Child's Nam	ie			
			Applica	tion		
Player Name				Age:		
Parent Name	E-mail:					
Cell Phone				Home Phone:		
T-Shirt Size	YS	<u>YM</u>	YL	AS	AM	AL
		<u> </u>		1	_1	1