



MARION FAMILY YMCA YOUTH SOCCER SPRING 2020

It's that time again, **Soccer Season!** Program focuses on teaching the players the basic skills, teamwork & sportsmanship. Our goal is for each child to gain a sense of achievement and belonging. Games will be played on Saturdays at the Marion Family YMCA. *Practice will be held once a week at each team coach's discretion.*



Marion Family YMCA programs depend on volunteer coaches. We welcome coaches at any level of experience, even first time coaches. When you volunteer to coach at the Y you will receive a coach's training to go over policies and rules of the sport. The only requirements are patience and a desire to create a sense of belonging and achievement with young people.

Season Dates: April 18—May 30, 2020

Ages: 3-13

Member Fee: \$30 per child Program Participant Fee: \$60 per child

Price includes: Reversible jersey. *Pictures may be purchased for an additional fee.*

****Team jerseys are the same as previous sports/seasons****

Registration Deadline: April 11, 2020

Late Registrations: April 12—April 17, 2020

Late registrations submitted, will be reviewed and accepted on a space-available basis with an additional \$10 late fee. You will be notified by the Program Manager if your registration was accepted with your team and season information.

Meet the Coach / Complete Paperwork: APRIL 18, 2020

Ages 3-4 @ 10:00 am / Ages 5-6 @ 11:00 am / Ages 7-9 AND Ages 10-13 @ 12:00pm

Scholarships Available! Bring your tax return to the Y Service Center at the time of registration for immediate approval. Families with annual income of \$35,000 or less may qualify for a \$15 reduction in fee. This can be used in place of but not combined with Early Bird or Sibling Discount.

Questions? Please call or e-mail Program Manager, Nicole Brown P 740-725-9622 E nbrown@marionfamilyymca.org

Number of Soccer Seasons Experience: 0 1 2 3 4 5 6 7+
Shirt Size: YS YM YL AS AM AL NONE (jersey discount)

Jerseys remain the same in each season and sport

Name _____ Age _____ D.O.B. _____

Address _____ Email _____

Phone Number _____ Parent's Name _____

DO YOU KNOW SOMEONE WILLING TO COACH/ASSIST? **YES** **NO**

COACH NAME: _____ **COACH PHONE NUMBER:** _____

We will try to honor requests. However, we DO NOT guarantee coach or teammate.

Name of Coach requested: _____ Name of Teammate requested (Limit 1 only): _____

Practice Day(s) requested (circle): Mon Tues Wed Thu Fri Any

OFFICE USE ONLY Late Registration Date/Time Received: _____