



# MONDAY SOCCER GRADES 2-5

Soccer with BWK will offer players the chance to further develop their skill set and gain more experience playing the game...in a safe and fun environment. The more touches on the ball, the faster a player will develop. We will demonstrate techniques such as dribbling, shooting, juggling and many more. The small group size will allow the players to get many touches on the ball.

Blue Wave Kickers is directed by Jon Bradley. Jon is the Boys Varsity Coach at Darien High School and Three-Time FCIAC Coach of the Year.

Note: Please have your child wear sneakers & bring a water bottle. A BWK t-shirt is included for each student. Soccer balls will be provided for use by BWK, please do not bring one from home.

**Students in Grades 2-5 will join Jon and his team on  
Mondays from 2PM-3PM in the gym.**

17 week session:

January 9, 23, 30

February 6, 13, 27

March 6, 13, 20, 27

April 3, 24

May 1, 8, 15, 22

June 5

Cost is \*\$263.50 for session for the first child,  
**50% off - sibling discount!** \*\$131.75 for each additional sibling.

**\*\*money is non-refundable\*\***

Please retain this sheet for your reference. Fill out and return the following waiver and payment to the office for your child to participate.

Make checks payable to OLSS. Please include waiver and payment in an envelope addressed as: BWK Soccer! Mondays and your child's name.

Classes cancelled by instructors will be made up if there are enough days left at the end of the year.  
Classes cancelled because school is closed due to inclement weather will not be made up.

# BWK Soccer Waiver

***Note: Parent MUST sign this waiver for his or her child to participate.  
One time waiver for the entire 2016-2017 school year.***

I (we) the parent(s) or legal guardian(s) of \_\_\_\_\_, who is a student at Our Lady Star of the Sea School, Stamford, CT hereby grant permission for my (our) child to participate in **Blue Wave Kickers Soccer** lessons.

My (our) signature(s) on this permission slip is (are) proof of my (our) informed consent and acts to absolve the school, the Bridgeport Diocesan Schools Corporation, and the Diocese of Bridgeport of any liability associated with these lessons.

I certify that my (our) child is in good health and without any physical ailments that might be contraindicated by this type of activity. I acknowledge this activity involves physical exertion and carries with it the potential for injury. I certify to **Blue Wave Kickers Soccer** and its agents and employees that the participant is physically fit and prepared for participation in the activities which will be undertaken and that the participant has not been advised by any doctor or limited. Further; in the event of injury, I hold **Blue Wave Kickers Soccer** and its agents and employees harmless.

Date: \_\_\_\_\_

Student name: \_\_\_\_\_ Grade: \_\_\_\_\_

Student name: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent name printed: \_\_\_\_\_

Parent signature: \_\_\_\_\_

Person and phone in case of emergency:

\_\_\_\_\_  
\_\_\_\_\_