



Oshkosh Community YMCA
3303 West 20th Avenue, Oshkosh, WI 54904

NON-PROFIT
ORGANIZATION
U.S. POSTAGE
PAID
OSHKOSH, WI
PERMIT NO. 145

“I am a member of a team, and I rely on the team, I defer to it and sacrifice for it, because the team, not the individual, is the ultimate champion.”

Mia Hamm

Check out the other exciting programs the Y has to offer. Call and ask for an Activities Guide today!



TEAMWORK, EXERCISE & FUN!

Outdoor Fall Youth Soccer



NEW THIS YEAR! Co-ed plus Girls-only leagues.

OSHKOSH COMMUNITY YMCA

REGISTER NOW

Registrations are now being accepted for Youth Fall Outdoor Soccer. For more information please call the 20th Avenue YMCA 3303 20th Avenue Oshkosh, WI 54904 (920) 230-8439 or visit our website at www.oshkoshymca.org.

**DRIBBLE,
PASS,
KICK,
SCORE!**

LOCATION 20TH AVE YMCA
3303 W. 20th Avenue

AGES Players are separated into teams based on their grade.

GIRLS 4k-Grade 4
August 12-September 23
TUESDAY 5:15-6:15 p.m.

CO-ED 4k-Grade 6
August 14-September 25
THURSDAY 5:15-6:15 p.m.

ENROLLMENT Open

SESSION

Registration deadline: August 1, 2014
A 10-minute practice will be followed by a game of two 20-minute halves.

FEE \$29 Y Member (includes t-shirt)
\$46 Activity Member (includes t-shirt)

REQUIREMENTS

Soccer shin guards, outdoor soccer cleats.
Games will be 6 v 6 with no goalies on a 40 X 60 yard field.

Soccer is an excellent form of exercise. Its continuous action helps kids build stamina, strengthen their muscles, and develop coordination. Its easy to learn and is fun for kids at all ages and stages of ability. Register now!

REGISTRATION FORM YMCA YOUTH OUTDOOR SOCCER LEAGUE

REGISTRATION ENDS AUGUST 1, 2014

\$10 late fee will be assessed after stated deadline.

MEMBER YES NO

PARTICIPANT NAME (first & last)

Select League: GIRLS (TUESDAYS) CO-ED (THURSDAY)

Shirt size (circle one) YOUTH S / M / L ADULT S / M / L / XL

BOY GIRL

School Grade Birthdate/Age

Address City ZIP

Telephone e-mail address

Team or coach's name from last year

I am interested in sponsoring a team. Please call or e-mail me.

I am interested in coaching soccer this year. Please call or e-mail me at:

NAME

I do ___ / do not ___ give permission to the Oshkosh Community YMCA to use video or photographs of my child in promotional materials.

AGREEMENT: 1) I hereby certify that my child is in good health and capable of safe participation in YMCA Youth Sports. I hereby authorize the Oshkosh Community YMCA, its staff and volunteers, to obtain medical treatment for my child in the event that parents cannot be reached. 2) I hereby waive and release any and all rights for damages I may have against the Oshkosh YMCA, its staff or volunteers for any and all injuries suffered during participation in YMCA activities.

PARENT SIGNATURE

DATE

Completed concussion documents.

PARENT - PRINT NAME