



The Pacesetter Soccer Club

Soccer Excellence Since 1980

ACADEMY & JR. ACADEMY

KeyBank Field House

5400 W. Central Ave.

Toledo, OH 43615

www.pacesetersoccer.net



WINTER 2017

PACESETTER ACADEMY

- U6- U9
- Size 4 soccer ball
- \$80 for 5 week session (Plus \$10 shirt)

PACESETTER JR. ACADEMY

- Ages 3-5
- Size 3 soccer ball
- \$80 for 5 week session (Plus \$10 Shirt)

MONDAYS & FRIDAYS 5:00PM- 5:50PM

Cost - \$80.00 per session

SESSION 2: JANUARY 9 – FEBRUARY 10, 2017

SESSION 3: FEBRUARY 20 – MARCH 24, 2017

All Academy training sessions are coached by Pacesetter Soccer Club staff coaches. All players will train and play in a gray Pacesetter T-shirt (\$10), black shorts, and black socks over their shin guards Don't forget the water bottle! **PROGRAM**

COORDINATORS:

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ACADEMY & JR. ACADEMY REGISTRATION

Player Name:	
Program:	ACADEMY JR. ACADEMY
Circle Session (s):	2 3
Address:	
City, State, Zip:	
Phone:	
Parent's Name(s):	
Email:	
Age:	Date of Birth:
Gender:	M F
T-shirt Size: YS YM YL AS AM AL AXL	
*T-shirt is optional if player already has shirt. Please include \$10 extra with registration if purchasing a new shirt.	

Consent for Medical Treatment (Minor) and Liability Waiver

I hereby give my consent to have a coach, athletic trainer, emergency personnel and/or doctor of medicine or dentistry provide my son/daughter with medical assistance and/or treatment and agree to be responsible financially for the reasonable cost of such assistance and/or treatment. Additionally, I have also read the concussion information sheet:

<http://www.oysan.org/Assets/Concussion+2013/Concussion+Info+Sheet.pdf>

I, the parent/ guardian for _____, release, discharge, and/or otherwise indemnify The Pacesetter Soccer Club and its employees for the academy for which I am registering my child to participate.

Signature: _____

Parent/ Guardian

Date

To register please go online to www.pacesetersoccer.com and click on the Winter Camps & Academies Tab