

**Somerville Recreation Department
2019 Fall Youth Soccer**

Premier German Soccer Clinic (Ages 3-4; 5-6)

Course Description: Premier German Soccer uses modern techniques to enhance coordination, increase spacial awareness and develop motor function in beginner's soccer. Guardian participation is encouraged as our trainers will work with parents and kids to understand basic training techniques they can use at home. The idea is to create a fun, safe environment where kids feel free to experiment, play and improve on the field and in their own back yard. Situational game play utilized to teach game concepts.

Dates/Time

Saturdays, September 7- October 12 from 9:00-10:00am

Location

Carol Payer Sports Complex (Green Street)

Fee

\$65 (six weeks) Includes performance t-shirt

Equipment

Cleats are recommended. Shin guards are required.

Registrations are accepted in person Monday – Friday from 8:30-4:30, by mail, or online at <https://register.communitypass.net/somerville>
Registration fees are non-refundable. Somerville Recreation reserves the right to limit registrations and, if necessary, cancel, alter and/or supplement programs. In the event a class is cancelled due to weather, or reasons beyond our control, all efforts will be made to reschedule the class. If it is not possible to reschedule a class, no refunds will be issued.



PARTICIPANT _____ M _____ F _____

DATE OF BIRTH _____ GRADE _____ SCHOOL _____

PARENT/GUARDIAN NAME _____

EMAIL (REQUIRED) _____

ADDRESS _____

HOME PHONE _____ MOBILE PHONE(S) _____

MEDICAL CONDITIONS (IF ANY) INSTRUCTORS SHOULD KNOW ABOUT: _____

EMERGENCY CONTACT _____ PHONE NUMBER _____

If the participant has individualized needs due to a disability, please check the following and someone will contact you regarding reasonable modifications. ____ Yes, I will need to be notified regarding reasonable modifications for my child and I have provided the necessary three (3) weeks' notice prior to the beginning of the program(s).

PROGRAM RELEASE: I certify that the participant listed above is physically able to participate in the Somerville Recreation's programs. I hereby give permission for the participant listed to participate in the above named activity, as well as release the Borough of Somerville from any and all liability from injuries, which may occur while participating in any program. **PHOTO RELEASE:** I, as the Parent/Guardian of the above named participant hereby authorize and consent to the use of his/her visual image by Somerville Recreation for appropriate purposes, including but not limited to: still photography, videotape, electronic and print publications and websites. I give this consent with no claim for payment. Check this box if you DO NOT consent to the Photo Release.

Parent/Guardian/ Participant Signature _____ Date _____

Office use only: Date _____ Amount rec'd _____ Check # _____ Cash _____ CC _____