



# WEST GEAUGA SOCCER CLUB

## **KID KICKERS SOCCER**

**Fall 2020**

CREATED TO TEACH PLAYERS **AGES 4 THROUGH 10** HOW  
TO LEARN THE PROPER SKILLS AND HAVE FUN!

<u><b>Kid Kickers Clinics</b></u> (pre-K and Kindergarten)	<u><b>u8 and u10 Kid Kickers Teams</b></u> (1 <sup>st</sup> -4 <sup>th</sup> graders)
<ul style="list-style-type: none"> <li>• 7 forty-five minute sessions</li> <li>• Perfect introductory soccer clinic</li> <li>• Balance of skills and games, but always fun!</li> <li>• Final "Game Day" Mini Tournament</li> <li>• Participation medals and T-shirts</li> <li>• 8-10 player max with each professional coach</li> <li>• WG Varsity soccer players as assistants</li> <li>• Knowledgeable USSF licensed coaches</li> </ul> <p>WHEN: Thursdays, August 20th – Oct 1st            WHERE: Clay Eddy Fields on Caves and Wilson Mills            TIMES: 5:30-6:15 pm            COST: \$80 if registered by July 31st, or \$90 after the 31<sup>st</sup>.</p>	<ul style="list-style-type: none"> <li>• 7 one-hour weekday training sessions</li> <li>• 6 games against neighboring communities</li> <li>• Great professional training and great price</li> <li>• Prepares players to compete at the next level</li> <li>• Game day T-Shirt &amp; participation medals</li> <li>• Each team will have a professional coach</li> <li>• WG Varsity soccer players as assistants</li> <li>• Knowledgeable USSF licensed coaches</li> </ul> <p>WHEN: U8 Practice Thursdays 6:15-7:15 Aug 20th – Oct 1st            U10 Practice Thursdays 6:15-7:15 Aug 20th – Oct 1st            WHERE: Clay Eddy Fields for all practices            TIMES: Saturday game schedule TBA            COST: \$115 if registered by July 31<sup>st</sup> or \$125 after the 31st</p>
<p style="text-align: center;"><u><b>Featured Coach</b></u></p> <p><u><b>Brian Murphy:</b></u>            *West Geauga Boys' Varsity Coach for 5 years            * Greater Cleveland Coach of the Year 2015            *News Herald Coach of the Year 2012            *Played Division 1 College soccer</p>	<p style="text-align: center;"><u><b>Featured Coach</b></u></p> <p><u><b>Sarah Neale:</b></u>            *Coached with WGSC for over 15 Years            *Coached with the Kid Kickers program for 5 years            *Currently coaching the u11 travel team            * Former WG High School Girls coach</p>

Please send registration and checks to:  
**WGSC P.O Box 181, Novelty, OH 44072**

FOR MORE INFORMATION, VISIT OUR WEBSITE OR CONTACT SARAH NEALE AT:

- [westgeugasoccer.com](http://westgeugasoccer.com)
- [wgsoccerkidkickers@gmail.com](mailto:wgsoccerkidkickers@gmail.com)



## Kid Kickers Registration

Player Name: \_\_\_\_\_ Age: \_\_\_\_\_

Birthday: \_\_\_\_\_ Fall '20 Grade: \_\_\_\_\_

School: \_\_\_\_\_ Gender: \_\_\_\_\_

Address: \_\_\_\_\_

Parent 1 Name and Cell: \_\_\_\_\_

Parent 1 Email: \_\_\_\_\_

Parent 2 Name and Cell: \_\_\_\_\_

Parent 2 Email: \_\_\_\_\_

Emergency Contact & Phone Number: \_\_\_\_\_

Medical concerns we should be aware of: \_\_\_\_\_

Youth T-Shirt Size: YXS \_\_\_\_\_ YSM \_\_\_\_\_ YM \_\_\_\_\_ YL \_\_\_\_\_ YXL \_\_\_\_\_

**Please check one:**

**Kid Kickers Clinic (4-6 year olds or Pre-K and Kindergarten):** \_\_\_\_\_

**Kid Kickers u8 Team (6-8 Year olds, or 1<sup>st</sup> and 2<sup>nd</sup> Graders):** \_\_\_\_\_

**Kid Kickers u10 Team (9-10 Year olds, or 3<sup>rd</sup> thru 5<sup>th</sup> Graders):** \_\_\_\_\_

WGSC KID KICKERS 2020 WAIVER OF LIABILITY

IMPORTANT TO READ CAREFULLY

Participant: \_\_\_\_\_

I, parent/legal guardian of the above-named Participant, a minor, agree that I, and anyone claiming through either of us, recognizing the possibility of physical injury associated with soccer, as partial consideration for the West Geauga Soccer Club ("WGSC") accepting Participant for participation in its Kid Kickers program to be held at Clay-Eddy Fields, hereby release, discharge and/or otherwise indemnify and hold harmless WGSC, its directors and its instructors from all costs, expenses, damages, and any claim by, or on behalf of, me and/or Participant as a result of Participant's participation in the WGSC described above.

I, further acknowledge that, I have been advised to obtain my own insurance.

\_\_\_\_\_  
Please Print

\_\_\_\_\_  
Signature

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

