

SHEBOYGAN YMCA

812 Broughton Drive, Sheboygan, WI 53081

P 920-451-8000 • F 920-451-8019

www.sheboygancountyyymca.org



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY



2018 INDOOR SOCCER LEAGUES

WINTER SESSION 2: FEBRUARY 10 - APRIL 7, 2018

Boys/Coed and Girls Divisions: U9/U10, U11/12 and U13/14

Join the fun of these fast paced indoor soccer leagues. Teams will play 6 games per session on Saturdays.

League Format for All Divisions

- U9 - U12 teams will play 6 vs 6, U13/14 teams will play 5 vs 5. Recommended roster is 8 - 12 players.
- Indoor soccer rules will be followed and all games are officiated.
- Teams must provide their own t-shirts and shin guards are required.
- Games will be played in the Main Gym at the Sheboygan YMCA.
- There is a maximum of two select players on the roster. Select teams must play up one division.
- The fee is \$190.00 per team for the session.
- The rules and schedules will be emailed to coaches. For more information or questions, please contact Mike Burns at mburns@sheboygancountyyymca.org or 920-451-8001 x118.
- **The registration deadline is January 24, 2018** and will be taken until divisions fill or the deadline. Early registration is recommended.



SHEBOYGAN YMCA 2018 WINTER SESSION 2 INDOOR SOCCER LEAGUES

Please return to the Sheboygan YMCA, 812 Broughton Drive, Sheboygan, WI 53081

Team Name _____ Shirt Color _____
 School _____ Community _____
 Coach _____ Address _____
 Email _____ Phone 1 _____ Phone 2 _____
 Scheduling Considerations _____

PLEASE CHECK THE BOX IF YOUTH IS A SELECT PLAYER

Player Full Name	School/Grade		Player Full Name	School/Grade
1. _____	_____	<input type="checkbox"/>	7. _____	_____
2. _____	_____	<input type="checkbox"/>	8. _____	_____
3. _____	_____	<input type="checkbox"/>	9. _____	_____
4. _____	_____	<input type="checkbox"/>	10. _____	_____
5. _____	_____	<input type="checkbox"/>	11. _____	_____
6. _____	_____	<input type="checkbox"/>	12. _____	_____

Hold Harmless Agreement

I hereby agree to waive any claim or liability I may have on the YMCA arising out of use of the facility, and further agree that I will indemnify and save harmless the YMCA from any and all claims brought against the YMCA, its members and volunteers, on account of death, injury, or damage to persons or property received by any persons by reason of the acts or omissions of the users in their use. I also agree to waive any claims against the YMCA, its members and volunteers for injuries or damages that may result from the conduct of other persons, including participants in the program. I understand the above responsibilities and I give permission for my team to participate and be photographed in YMCA activities.

Coach's Signature _____ Date _____

TEAM FEE

\$190.00
18W1-1YLEAG

GIRLS DIVISION

U9/10 Grades 3-4
 U11/12.... Grades 5-6
 U13/14.... Grades 7-8

BOYS/COED DIVISION

U9/10..... Grades 3-4
 U11/12 Grades 5-6
 U13/14 Grades 7-8

Payment

Cash Check Credit Card # _____ Exp Date _____ 3 Digit Code _____

Receipt # _____ Amt Paid _____ Date _____ Staff _____