

The East Side's Premier Soccer Club!

MADISON FC FOOTSKILLS DEVELOPMENT



FOR: BOYS and GIRLS – Ages 8, 9, 10 and 11

DATES: June 13, June 14, June 15 and June 16

TIME: 5:00 – 6:30 pm

LOCATION: Reindahl Park, 2100 Portage Road, Madison

(Located across from East Towne Mall, just behind the Arby's and Office Depot off East Washington Avenue)

COACHES: Nick Genova and Shant Mesdjian

COST: \$60 if received by May31ST, \$75 if received AFTER May 31ST

The Madison FC ACADEMY will focus on TOTAL PLAYER DEVELOPMENT especially FOOT SKILLS: Dribbling, Passing, Receiving, Shooting & developing a good "FIRST TOUCH." Classes taught by Boys & Girls Coaching Directors Shant Mesdjian (USSF "D") & Domenick (Nick) Genova (USSF "B"). Madison FC Staff possess the SKILL, KNOWLEDGE & PASSION that it takes to develop youth players!

For More Info Contact: Kelli Weisinger at 608-334-7764 or kjweisinger@gmail.com

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Player Name: _____ Boy Girl

Birth Date: _____ Age: _____ School: _____

Address: _____ City: _____ Zip: _____

Emergency Phone(s): _____

Players Current Club: _____

Email Address: _____

The registered "Player" and parent/legal guardian of the "Player" recognizes that soccer is a vigorous sport and that the "Player" may suffer temporary or permanent serious physical injury including, but not limited to, sprains, fractures, brain or spinal damage, paralysis or even death while playing in a soccer game, tournament, practice or scrimmage. With full knowledge of these risks and in consideration for Madison FC, Inc. pursuant to the recreational assumption of risk statute, sec. 895.525 (4), Wis. Stats., the Parent (or Legal Guardian) of the "Player" hereby accepts and assumes full responsibility for any and all harm caused by negligence, and agrees to release, discharge, and/or otherwise indemnify Madison FC, Inc., including all staff and directors. This Release of Liability shall remain in effect for the duration of this program and shall be interpreted under Wisconsin law.

Parent / Guardian Name: _____

Parent / Guardian Signature: _____ Date: _____

Mail completed form and check (payable to "Madison FC") to:
Madison FC, 5410 Greenleaf Drive, Madison, WI 53713

www.madisonfc.com