

The East Side's Premier Soccer Club!

2012 MADISON FC ACADEMY

For **BOYS** and **GIRLS** aged **8 - 11**



SATURDAYS: January 7, 14, 21, 28 & February 4, 11, 18 & 25

COACHES: Nick Genova & Shant Mesdjian

\$85 for EIGHT 75-minute SESSIONS ... *INCLUDES T-SHIRT!*

***** Space is limited so sign up today! *****

ALL classes held at Princeton Club EAST - 1726 Eagan Road, Madison, WI 53704 (NO calls to the Princeton Club!)

PLEASE NOTE: Absolutely NO FOOD or DRINK (Sport Drinks, Coffee etc.) in the GYM - PLAIN water ONLY!

PARENTS ALLOWED TO VIEW SESSIONS FROM INSIDE GYM when accompanying an MFC Academy registered child.

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"). MFC Staff possess the **SKILL, KNOWLEDGE & PASSION** that it takes to develop youth players!

MORE INFO contact: Kelli at **608-334-7764** or **kjweisinger@gmail.com**

I am **REGISTERING** for: ___ 8-9 yrs (U9-U10): **12:00-1:15** ___ 10-11 yrs (**U11-U12**): **1:15-2:30**

(Playing "UP" **only** with MFC approval)

TEE-SHIRT: ___YS (6-8) ___YM (10-12) ___YL (14-16) ___AS ___AM ___AL ___AXL

I am **CURRENTLY** playing **OUTDOOR** soccer with: CLUB/TEAM _____

AGE GROUP: ___U7 ___U8 ___U9 ___U10 ___U11 ___U12 LEVEL: ___REC ___CLASSIC ___STATE

Player Name _____ Boy ___ Girl

Birth Date ____/____/____ Age _____ School _____

Address _____ City _____ Zip _____

Emergency Name/Phone _____

E-Mail 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. The 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:

Kelli Weisinger 5410 Greenleaf Drive Madison, WI 53713

www.madisonfc.com