

Riley Rink 2010 Soccer Academy



Directed by Andrea Lee

BBA Boys JV Gold and Southern Vermont Fusion Girls Coach

Saturday mornings

March 20 – May 8

6 weeks: 3/20, 3/27, 4/3, 4/24, 5/1, 5/8

Kindergarten – 1st

8:30am to 9:30am

2nd grade – 3rd

9:45am to 10:45am

- Learn soccer skills and tactics through games with emphasis on improvement and fun!*
- Great preparation for next fall's rec. dept. soccer season.*
- Academy t-shirt included!*
- Enrollment is limited, so sign up now! Registrations due 3/1!*

To register: fill out the back side of this form and mail it or drop it by: Riley Rink at Hunter Park, PO Box 835, Manchester Center, VT 05255 or fax (802)-362-4432

Riley Rink Soccer Academy Registration Form

Questions: 802-362-0150

Name _____ D.o.b _____ age _____
Address _____ Phone _____
_____ email _____

Parent/guardian _____ emergency contact _____
Sibling participating _____ emergency phone _____

Please indicate your age :

K-1 ___ 8:30 am – 9:30 am 2nd-3rd grade ___ 9:45 am - 10:45 am

What to bring:

Shin guards (required), Water bottle, High socks or long pants recommended, Indoor shoes/sneakers.

___ # Campers x 85 = _____

total due \$ _____

Cash ___ check ___ credit card ___ visa ___ master card ___ American express ___

Credit card number _____ expires on _____

name as it appears on card _____

Liability and medical release

In consideration of your permitting (PLAYER) _____ to use the Riley Rink facility in Manchester, Vermont, for any purpose whatsoever, I hereby covenant and agree with Riley Rink, the officers, agents, and employees, and all persons engaged as instructors or administrators in any programs in which he/she may be participant, to indemnify and hold harmless, each and every one of them from and against all claims, liability, loss cost, damages and expenses which may in any way arise out of, or in conjunction with, the use by him/her or such facility; including without limitation all claims he/she might have for personal injury or property damages to him/her or so arising. I also give consent to administer first aid and emergency transport to the nearest medical facility.

Date: _____

Signature: _____
parent or guardian

Office use only: Date rec'd _____ confirmed _____ added to roster _____
Total due _____ Total paid _____ Balance due _____ check/cash _____

Riley Rink at Hunter Park, Route 7A, Manchester Center, VT (802)-362-0150
Fax (802) 362-4432