



# Santa Maria Valley YMCA Youth Arena Soccer Winter 2012



The Santa Maria Valley YMCA is excited about our Winter Season of Arena Soccer at the **CENTRAL COAST'S ONLY ARENA SPORTS FACILITY!** Arena Soccer is a fast paced, non-stop action sport that will be enjoyed by all. YMCA Youth Sports focuses on skill development, good sportsmanship, teamwork, and the development of all participants to their fullest potential. Everyone is a winner in Y-soccer, since no league standings are kept. Our main emphasis is on fun, fitness, teamwork, and fair play.

**In YMCA Youth Sports Programs, EVERYBODY PLAYS AND EVERYBODY WINS.**

<b>Fees</b>	\$60 YMCA Member* \$80 Participants*	<b>Financial Assistance Available</b>
*Includes an 8-week season, team jersey, and league administration. <b>All fees are NON-REFUNDABLE.</b> \$25 processing fee on all negotiable refunds and returned checks.		
<b>Registration Dates</b>	<b>December 8, 2011– January 31, 2012</b>	
<b>Team Formation</b>	Teams will be assigned after Jan 31st and you will be contacted by the coach regarding your first practice after the coaches meeting on Feb 2nd. After teams have been formed there will be <b>NO changes made.</b> Special requests are <b>NOT</b> guaranteed.	
<b>Season Dates</b>	February 11, 2012 - March 31, 2012 All games are on Saturdays.	
<b>Games</b>	Game times will be announced once teams are formed. Game times are dependent on the number of teams formed. Games can start as early as 9:00 AM with the youngest divisions playing first. If a game is rained out, we will make that game up after the last game of the season.	
<b>Practices</b>	To be determined by the coaches. 1 practice per week for approximately 1 hour. <b>You must be available to practice one time throughout the week: Monday - Friday, 3pm - 7pm and special practice time requests are NOT guaranteed.</b>	
<b>Required Equipment</b>	All players must wear shin guards. Choice of indoor shoes, tennis shoes, or cleats.	
<b>Coaches Needed!</b>	<b>\$15 off your child's registration</b> (plus the YMCA picks up a \$5.00 background check fee) if you volunteer to be a coach! (Limit one discount per player and team) A coach's basic function is to organize the team. <b>Mandatory Coaches Meeting Feb. 2nd, 2012 @ 5:00pm at the YMCA.</b> Team rosters, practice schedules, and game schedules will be handed out.	
<b>Leagues</b>	3-5 years Co-ed	6-7 years Co-ed 8-9 years Co-ed

## Santa Maria Valley YMCA Winter 2012 Youth Arena Soccer Registration Form

Player's Name \_\_\_\_\_  M  F Age \_\_\_\_\_ Birth Date \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ School \_\_\_\_\_ Level of Play  Beg  Int  Adv  
 Family Physician \_\_\_\_\_ Physician Phone \_\_\_\_\_  
 Father's Name \_\_\_\_\_ Wk Phone \_\_\_\_\_ Coach?  Y  N  
 Mother's Name \_\_\_\_\_ Wk Phone \_\_\_\_\_ Coach?  Y  N  
 Shirt Size  YXS  YS  YM  YL  YXL  AS  AM  AL  
 Select One:  \$60 Member  \$80 Participant  
 W/Coach Discount  W/Coach Discount  
 Receipt # \_\_\_\_\_ Staff Initials \_\_\_\_\_

### Santa Maria Valley YMCA Release/ Waiver

I, the undersigned parent/person having legal custody of the above said minor, give permission for the minor to participate in the YMCA program described above. The minor is physically able and mentally prepared to participate in all activities for this program. I hereby voluntarily and knowingly assume all risks and dangers inherent and incidental to the activities of the program. I will not hold the YMCA liable for any injuries incurred during the program whether caused by equipment or the acts or omissions of others including YMCA personnel. I further agree and specifically intend to waive as to the YMCA and staff, officers and directors thereof any claim known or unknown to me. I do hereby authorize the YMCA as agent for the undersigned, to consent with respect to the minor to any x-ray examination, anesthetic, medical, dental, or surgical diagnosis or treatment, and hospital care which is deemed advisable by any physician and/or surgeon whether such diagnosis or treatment is rendered at the office of the physician or at the hospital. I understand that the YMCA is not responsible for costs for medical care. If I participate in the program, whether as a coach, instructor, aide, spectator, or participant, I presently waive as to the YMCA and staff, officers, and directors thereof, any claim presently known or unknown damage to property or personal injury whether caused by equipment or the acts or omissions of others including YMCA personnel. I give permission for the YMCA to use, without limitation or obligation, photographs, film footage, or tape recordings which may include my child's image or voice for purposes of promoting or interpreting YMCA programs

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Questions? Call YMCA at 937-8521  
3400 Skyway Dr. Santa Maria, CA 93455

