



# DENVER KICKERS YOUTH SOCCER ACADEMY

Denver Kickers Sport Club & Home Field-16776 W. 50<sup>th</sup> Ave Golden Colorado 80403. 303-279-9097 X2 www.denverkickers.com

**KICKERS KIDS – Family & Micro Soccer- Questions please call Theresa Reed: 303-940-7649.**

|                          |                       |                |    |                 |                      |                      |                     |             |                   |
|--------------------------|-----------------------|----------------|----|-----------------|----------------------|----------------------|---------------------|-------------|-------------------|
| age                      | <b>INTER-LEAGUE</b>   | 3/2/09         | To | 5/23/09         | 3/14/09-5/16/09      | Spring Season        | <b>Due Jan. 9</b>   | Spring Cost | Late Registration |
| U9                       | 8/1/99-7/31/00        | Tuesday 5:00   | &  | Thursday 5:00   | Saturday 9:30        | 3/2/09-5/23/09       | <b>\$ 90.00</b>     | \$ 100.00   | \$ 115.00         |
| Age                      | <b>MICRO TEAMS</b>    | <b>WEEKDAY</b> |    | <b>WEEKDAY</b>  | <b>WEEKEND</b>       | <b>Spring Season</b> | <b>Early Reg.</b>   | Spring Cost | Late Registration |
| U8*                      | 8/1/00-7/31/01        | Wed. 5:00      | &  | Thursday 5:00   | Saturday 9:00        | 4/8/09-5/30/09       | <b>\$ 80.00</b>     | \$ 95.00    | \$ 105.00         |
| U7*                      | 8/1/01-7/31/02        | Wed. 5:00      | &  | Thursday 5:00   | Saturday 9:00        | 4/8/09-5/30/09       | <b>\$ 80.00</b>     | \$ 95.00    | \$ 105.00         |
|                          | <b>* Coach Needed</b> | 4/8/09         | To | 5/28/09         | 4/11/09-5/30/09      | 7.5 weeks            | <b>Due Feb. 7</b>   | March 15    |                   |
|                          | <b>FAMILY SKILLS</b>  | <b>WEEKDAY</b> |    | <b>WEEKEND</b>  | <b>Spring Season</b> | <b>Early Reg.</b>    | <b>Spring Cost</b>  |             |                   |
| U6 - 8/1/02-7/31/04 – U5 |                       | Thursday 5:00  |    | Saturday 10:00  | 4/9/09-5/30/09       | <b>\$ 60.00</b>      | \$ 70.00            |             |                   |
| <b>AGE GROUPS</b>        |                       | 4/9/09-5/28/09 |    | 4/11/09-5/30/09 | 7.5 weeks            | <b>Due Feb. 7</b>    | <b>Due March 15</b> |             |                   |

**What To Bring: Laced shoes or cleats, shin guards, filled water bottle, size 3-4 soccer ball, enthusiasm. PLEASE, Bring Mom and Dad ON TIME!**

UNIFORM- reversible jersey Red & White \$20, Shorts B\$15, Socks \$5  
 Short & Shirt size of child? (circle one) Youth: S M L Adult: S M  
 (Inter-League - jerseys (B & W) \$30)

Interested In (X)? Coaching \_\_\_\_\_ Managing \_\_\_\_\_ Referee \_\_\_\_\_

**Registration Sun. March 15 & Free 1 hour Player clinic**  
**2:00 for Micro-Teams U8 & U7 & 3:00 for Family Skills U6**  
 Parent meeting (players bring your soccer shoes)

|   |  |
|---|--|
| <b>501(c)(3) Youth Soccer Donations (request donation form if needed)</b> |  |
| New Youth Soccer Field (\$)   | _____ Soccer Academy Program (\$)                    |
| _____   |  |
| <b>U7 &amp; U8 TOURNAMENT May 16 &amp; 17 Times &amp; Field TBA \$35</b>  |  |
| Total =   | Registration + Uniform + Total Donation + Tournament |
| _____ =   | _____ + _____ + _____ + _____                        |

**Coaches Clinic Sunday March 15 @ 12n to 6p** Bring your turf shoes

Child Name \_\_\_\_\_ Male Female (Circle) Age \_\_\_\_\_ Date of Birth \_\_\_\_\_ Phone number \_\_\_\_\_

E-mail Address \_\_\_\_\_ Parent Names \_\_\_\_\_

Address \_\_\_\_\_

(One form per player) Make your check payment to Denver Kickers - send in with this form: **Youth Registrar**, 16776 W 50<sup>th</sup> Avenue, Golden CO 80403

**\*U5 and U6-Kickers Kids Family** - Camp format for practices, Random Teams for Game Day, 3v3, No GK, 1 practice per week, 1 Game Day per week, 8 week season; **\*U7 & U8 Kickers Kids Micro Teams** - Camp format for practices, Random Teams for Game Day, 3v3 MicroSoccer intro to 4v4, Sweeper-Keeper role in place, 2 practices per week, 1 Game Day per week, 8 week season; Spring Tournament; **\*U9 Fall Team Format** - Regular Games - 8v8 –

Authorization - I, the parent / legal guardian of the registrant, a minor, agree that I and the registrant recognize the risk and possibility of physical injury associated with soccer and in consideration for The Denver Kickers accepting the registrant for its soccer programs and activities, hereby release, discharge and/or otherwise indemnify The Denver Kickers, its sponsors, employees, coaches, directors, and associated personnel, including the owners of fields, and facilities utilized for the program, against any claim by or on behalf of the registrant as a result of the registrant's participation in the program and/or being transported to or from the same, which transportation I hereby authorize. As a parent / legal guardian of the registrant, I hereby give consent for emergency medical care prescribed by a duly licensed Doctor of Medicine, Doctor of Dentistry, or associated emergency provider. This care may be given under whatever conditions necessary to preserve the life, limb, or well being of my dependant. I know of no medical, mental or physical condition that would affect my dependant's ability to participate in this activity.

Signature \_\_\_\_\_