

SECPTA SOCCER Fall 2010 Information and Registration Form

What: Soccer

Who: Boys and Girls ages 3 (Must be 3 on or before **8/31/10**) to 5 years old.
Current SECPTA Members only

Please note – all SECPTA memberships expire on 6/30/10 and must be renewed for the 2010/2011 year.

Where: Solon Recreation Ball Fields (Next to the Tennis courts)

When: SATURDAY mornings, for 6 weeks beginning September 11th through October 23rd. There is NO game on September 18th.
Rain date is October 30th.

Why: To learn teamwork, basics of the game, sportsmanship, and to have fun.

Cost: **\$20.00 per child.** This cost will cover t-shirts, equipment, and certificates. The registration fee is non- refundable. If you would like SECPTA to purchase shin guards on your behalf, please include an extra **\$8.00 per child** to your total and your child's shin guards will be available at the first game.

SECPTA Soccer Rules and Guidelines:

- All games are for fun and to introduce children to the game. Scores will not be kept. Everyone is a winner.
- Practices are at the beginning of each game.
- 3-year olds play against other 3-year olds, etc.
- Coaches will rotate players. All children will play at least 2 quarters each game.
- Shin guards are required to play

To register, please return the Registration Form, a 2010-2011 Membership form (or indicate in space provided that you are already a member) and a check for the appropriate amount of money, payable to SECPTA by Noon on Friday, August 27, 2010 to:

**Emily Johnson
33905 Blue Heron Dr.
Solon, OH 44139**

Registration forms and payment will be accepted at all board and regular meetings. If you have any questions, please contact Emily Johnson at 440-498-0388 or via e-mail at soccer@solonearlychildhoodpta.com.

REGISTRATION FORM

Member's Name: _____ 2010-2011
SECPTA Member Y N

Address: _____

Email Address: _____ Phone Number: _____

*All scheduling/team roster information will be sent via e-mail. If you prefer to receive Postal Mail? Y N
this information via postal mail please indicate so here.

Child's Name: _____ Age: _____ Birth Date: _____ M F Played Before? Y N

Child's Name: _____ Age: _____ Birth Date: _____ M F Played Before? Y N

Number of children ___ X \$20.00 = \$____; Number of Shin Guards ___ X \$8.00 = \$____; Total Amount Due = \$____

ATTENTION PARENTS: We need your help! Parents make SECPTA Soccer happen.

Willing to coach Name: _____ Field Crew Name: _____
(no experience needed) (set up)

Office Use Only	Date Rcv'd _____	Check # _____	Amount Pd. _____	Rcv'd by _____
	Membership _____	Soccer _____	Shin Guards _____	