



U6 COED SOCCER FALL 2022 & SPRING 2023 SEASON

for Boys and Girls Age 4 - Kindergarten

Your child will learn the fundamentals of soccer with their friends and classmates. Volunteer coaches lead practice once a week, with an emphasis on fun and learning the sport of soccer. The fee includes a t-shirt.



The day and time in each community is listed below. **Soccer cleats are optional, shin guards are required.** For more information, please contact Ashley at 920-467-2464 x207 or aliermann@sheboygancountyyymca.org.

HOWARDS GROVE
FALL.....SEPTEMBER 19 - OCTOBER 24, 2022
SPRING.....APRIL 24 - JUNE 5, 2023

Day & Time

Monday 5:00pm - 6:00pm

Location

Northview Elementary School
 902 Tyler Rd, Howards Grove

- *The soccer field is on west side of school.*
- *Spring season: there is no class on May 29.*

SHEBOYGAN FALLS
FALL.....SEPTEMBER 21 - OCTOBER 26, 2022
SPRING.....APRIL 26 - MAY 31, 2023

Day & Time

Wednesday 5:45pm - 6:45pm

Location

Sheboygan Falls Elementary School
South end behind the playground

SHEBOYGAN FALLS YMCA FALL 2022 - SPRING 2023 U6 COED SOCCER

Please return to the Sheboygan Falls YMCA, 305 Buffalo Street, Sheboygan Falls, WI 53085

Name _____ Birth Date _____ Grade _____ M F
 Address _____ City _____
 State _____ Zip Code _____ Phone 1 _____ Phone 2 _____
 Parent/Guardian _____ Email _____

Parent Volunteer Coach

Name _____ Phone _____ Email _____

Hold Harmless Agreement

I hereby agree to waive any claim or liability I may have on the YMCA arising out of use of the facility, and further agree that I will indemnify and save harmless the YMCA from any and all claims brought against the YMCA, its members and volunteers, on account of death, injury, or damage to persons or property received by any persons by reason of the acts or omissions of the users in their use. I also agree to waive any claims against the YMCA, its members and volunteers for injuries or damages that may result from the conduct of other persons, including participants in the program. I understand the above responsibilities and I give permission for my child to participate and be photographed in YMCA activities.

Parent Signature _____ Date _____

<input checked="" type="checkbox"/> Community	<input checked="" type="checkbox"/> Grade	<input checked="" type="checkbox"/> T-Shirt Size	<input checked="" type="checkbox"/> Fee (Fall 2022/Spring 2023 Season)
<input type="checkbox"/> Howards Grove	<input type="checkbox"/> Preschool	<input type="checkbox"/> Youth XS	<input type="checkbox"/> \$35.00 YMCA Family Member
<input type="checkbox"/> Sheboygan Falls	<input type="checkbox"/> 4K Kindergarten	<input type="checkbox"/> Youth SM	<input type="checkbox"/> \$38.00 YMCA Youth Member
	<input type="checkbox"/> 5K Kindergarten	<input type="checkbox"/> Youth MD	<input type="checkbox"/> \$47.00 Participant
		<input type="checkbox"/> Youth LG	

Email form to: aliermann@sheboygancountyyymca.org

Payment

Cash Check Credit Card # _____ Exp Date _____ 3 Digit Code _____

Receipt # _____ Amount Paid _____ Rec'd By _____ Date _____ 2223-2YU6SOCCER...