

SOUNDS GREAT! LET'S REGISTER

Fill out, detach and return form below with payment to register your child. Program Starts March 16

PROGRAM 1 • PREMIER DEVELOPMENTAL U9, U11, U13

Premier Developmental Programs Boys and Girls (U9, U11, U13)

Try-Outs Required, Please attend one or all of our Play Days listed below:

Saturday, Jan 26th @ Aptos Jr. High School

U9: 9am - 11am, U11: 12 - 2pm, U13: 3pm - 5pm

Saturday, Feb. 2nd @ Good Shepherd School

U9: 9am - 11am, U11: 12 - 2pm, U13: 3pm - 5pm

Sunday, Feb 10th @ Scotts Valley Middle School

U9: 9am - 11am, U11: 12 - 2pm, U13: 3pm - 5pm

PROGRAM 2 • SKILL BUILDERS AGES 6-12

Ages: 6-12 BOYS & GIRLS

Time: Mondays 4-6 PM, starting March 17th

Cost: \$110 for 8 Sessions (includes training shirt and a ball)

Location: Anna Jean Cummings Park, Soquel

PROGRAM 3 • LITTLE SKILL BUILDERS AGES 4-6

Ages: 4-6 BOYS & GIRLS

Time: Mondays, Wednesdays, Fridays (4:30-6 pm), starting March 31st, April 2, April 4th

Cost: \$80 for 1 session per week, \$140 for 2 sessions per week, \$200 for all 3 sessions (includes training shirt and a ball)

Location: Anna Jean Cummings Park, Soquel

PROGRAM 4 • HIGH SCHOOL/COLLEGE PREP PROGRAM AGES 13-18

Ages: 13-18 BOYS & GIRLS

Time: Fridays 4 - 6 PM, starting March 21st

Cost: \$135 for 10 Sessions (includes training shirt & practice ball)

Location: Anna Jean Cummings Park, Soquel

PROGRAM 5 • GOALKEEPER TRAINING AGES 6-12, 13-17

Ages: 6-12, 13-18 BOYS & GIRLS

Time: Fridays (4-6 pm), Start date March 21st

Cost: \$135 for 10 Sessions (includes training shirt and a ball)

Location: Anna Jean Cummings Park, Soquel



Please provide the following player information and return to:

Catalyst Soccer Club, P.O. Box 1175, Santa Cruz, Ca. 95061 T 831.423.3556 www.catalystsoccer.com

Child's Name: _____ Age: _____ Boy _____ Girl _____ Date of Birth: _____

Parent's Name or Guardian: _____ Phone Number: _____

Address: _____ City: _____ Zip code: _____

Emergency Contact: _____ Email address: _____

Program: 1 2 3 M W F 4 5 Tshirt: Adult S M L XL Youth: S M L XL

Number of Camps: _____ Payment enclosed: _____

Release of Liability and Permission to Play

I, Parent or Guardian, accept that participation in the Catalyst Soccer training program could possibly lead to injuries. I accept this and hold harmless the Catalyst Soccer Club and its trainers from damages or injuries which may occur from participation in the summer programs.

Parents Signature: _____ Date: _____

Send in this registration form and tuition per camp/week payable to:
Catalyst Soccer Club is a not for profit youth sports organization
that has scholarship availability. #52-2390759

Catalyst Soccer Club • 831.423.3556
PO Box 1175, Santa Cruz, CA 95061-1175
www.catalystsoccer.com