



**PITTSFIELD SOCCER CLUB
KICKERS PROGRAM
FALL 2010**

PSC Kickers is a fun filled, non-competitive program open to all Berkshire County residents and designed to help players develop their fundamental soccer skills. The program will consist of one weekly evening practice and a weekly Saturday morning practice and game session. The Kickers program is appropriate for school-age children from Kindergarten through the 5th grade.

The program is scheduled to **begin** on **Wednesday, September 1** and will run **through Saturday, October 30**. All practice and game sessions will take place at a Pittsfield location to be announced; and will be run by the professional trainers from Ashley's Soccer Camp. There will no games played on Saturday, October 9, due to the Columbus Day weekend.

The **cost** of the program, which includes a t-shirt, is **\$60**. To sign up, complete the information below and return this form, along with your **check** payable to **Pittsfield Soccer Club**, to:

**Pittsfield Soccer Club
C/O Trad & Melissa Campbell
115 Winesap Road
Pittsfield, MA 01201**

This program is very popular and fills up quickly; so please register early. Space may be limited. Paid registration must be received by Friday, August 13 to ensure a spot in the program. Further information is available by visiting our website, www.pittsfieldsoccer.org, calling (413)499-1566, or by e-mailing tcampbel@nycap.rr.com

To assist young soccer players who, due to lack of financial resources, may otherwise be denied the opportunity to grow and develop in the sport, the Pittsfield Soccer Club makes scholarship opportunities available to participants in all of its programs, including Kickers. Additional information about our scholarship program is available on the club's web site.

PLAYERS NAME: _____ **AGE:** _____ **GRADE:** _____ **SEX: M / F**

PARENT or /GUARDIAN NAME: _____

ADDRESS: _____

PHONE#: _____

E-MAIL ADDRESS: _____

I AM WILLING TO COACH A TEAM **(Check Box if "Yes")**

I declare the above participant to be in good health and able to participate in athletic activities. I assume all risks and hereby release, absolve, and hold harmless Ashley's Soccer Camp (ASC), The Pittsfield Soccer Club (PSC), its coaches, officers, and volunteers from any and all liability for accidental medical or dental expenses incurred as a result of this program. In the event of illness or injury, ASC and/or PSC staff and volunteers have my permission to provide emergency medical care.

Signature of Parent/Guardian _____ **Date** _____