

Birmingham Family YMCA

Fall

3 Yr. Old Soccer Lessons



Fun, Fit, and Fair play

Your child will learn the basic skills of athletics while being introduced to the world of soccer. Skill development will focus on kicking, dribbling, passing, and scoring. Your child will improve their hand-eye coordination and be part of a team!

Practices are held once a week for 6 weeks

Shin guards, black shorts, and reversible jerseys are required for all participants.

Jerseys can be purchased at the front desk for \$12.00

Dates: Sept. 8-Oct. 13 (6 weeks)

Day & Time: Wednesday 5:00-5:30 Wednesday 5:45-6:15
(pick one) Wednesday 6:30-7:00
(look on other side for team assignments)

Location: St. James Park (behind the YMCA)

Ages: 3 Year Olds

Cost: Facility Members \$35
Program Members \$50
(*a minimum of a program membership must be purchased and is good for 1 yr)

400 East Lincoln Street
Birmingham, MI 48009
248-644-9036
www.ymcametrodetroit.org



Registration begins: July 20 (registration must be in person)

Parent Meeting: Wed, Sept. 1 7:00 p.m. at the YMCA
(rules, rosters, and schedules will be handed out)

****VOLUNTEER ASST. COACHES
ARE NEEDED****

**Help Develop Youth!
Volunteer Asst. Coaches are Needed**

Participant Name: _____ Program Table File _____ Team Name _____

Parent/Guardian Name: _____ Parent's E-Mail: _____ Phone #: _____

Address: _____ City: _____ State: _____ Zip: _____

How did you hear about the soccer league? (circle everything that applies)

Website Past participant Friend/Word of Mouth Postcard YMCA E-Mail Newspaper School Flyer YMCA Brochure

Do you need a YMCA Reversible Youth Sports Jersey: YES or NO (*Jerseys are \$12*)

As a parent/guardian, I understand that family involvement is crucial to the success of this youth sports program, I would like to help coach the three year old soccer lessons. The head coaches will be the Youth and Family Director and Coordinator.

Yes No

Volunteer's Name: _____

My child has been properly screened and there are no medical conditions or injuries that preclude his/her participation in sports.

Parent/Guardian Signature: _____ Date: _____

YOUTH SUPER SPORTS™

We build strong kids, strong families, strong communities.

Practice

Day/Time Team # Program #

Wednesday 5:00-5:30

Broncos 03-326-01
Chippewas 03-326-01

Wednesday 5:45-6:15

Lions 03-326-02
Tigers 03-326-02

Wednesday 6:30-7:00

Red Wings 03-326-03
Pistons 03-326-03

****Team & Friend**
Registrations Must
Be Done As a
Whole! **

Medical Forms:

All participants must have a YMCA medical form on file and completed by a parent or guardian. All forms need to be turned in to the front desk by the start of the season.

**Financial
Assistance is
Available**

