



REC LEAGUE SOCCER

Grassroots soccer is for beginners/recreational players who want to learn the game, but want to play with their friends and have fun! Players will learn soccer skills appropriate for their age level, good sportsmanship and how to work as a team.

Ages: 5-18 yrs.

Session dates: August 26–November 11, 2022

Deadline to register: July 31, 2022

Location: Mesa Verde Middle School field at 8375 Entreken Way, San Diego 92129

Registration fee: \$150 until June 30, \$160 July 1–31, \$185 after July 31 (if space is available)
Includes t-shirt, 12 weeks of training, and games on Saturdays

Volunteer coaches needed! Receive \$25 off registration, coaching shirt, use of equipment, and support from professional coaches. Volunteer coaches can choose their practice day/time. (Coaches required to complete a coaching certification.)

Team sponsorships: Tax deductible sponsorships are available for \$250 with company/family name on team jerseys.

Teams: Team requests are encouraged, but not guaranteed.



Register online at sdfa.elitesoccerclubs.com/camps or by using this form.

Player name _____ DOB _____ School / Grade Fall 2021 _____ Shirt size: YS YM YL YXL AS AM
 Address _____ Parent / Guardian name(s) _____
 City _____ State _____ Zip _____ Phone _____ Email _____

Cancellations must be made 7 days prior to the start of the league and submitted in writing to johnson@sdfacademy.com. An administration fee of \$50 will be applied to any cancellation. **Medical release:** I, the parent/guardian of the player named herein, acknowledge that participation in soccer, as in any sport, may result in injury. As the undersigned parent/guardian, I therefore release the FC Golden State San Diego and San Diego Football Academy teams, agents, officers, coaches and players from all liability or responsibility for any claim damage or legal action on behalf of the player or the player's parents, heirs or personal representatives, arising from an injury the player may sustain while participating in soccer or related activities, including transportation, except to the extent and in the amount covered by FC Golden State San Diego / San Diego Football Academy insurance plan. Additionally, as the parent/legal guardian of the aforementioned player, I hereby give my consent for emergency medical care prescribed by a duly licensed Doctor of Medicine or Doctor of Dentistry. I understand this care may be given under whatever conditions are necessary to preserve the life, limb or wellbeing of my dependent.

Parent / Guardian signature _____ Date _____

Make checks payable to SDFA - Mail completed registration form / and check to: F.C. Golden State - Grassroots P.O.BOX 721030, San Diego, CA 92172