SportZone Soccer Academy

at The SportZone Spring-Summer 2009

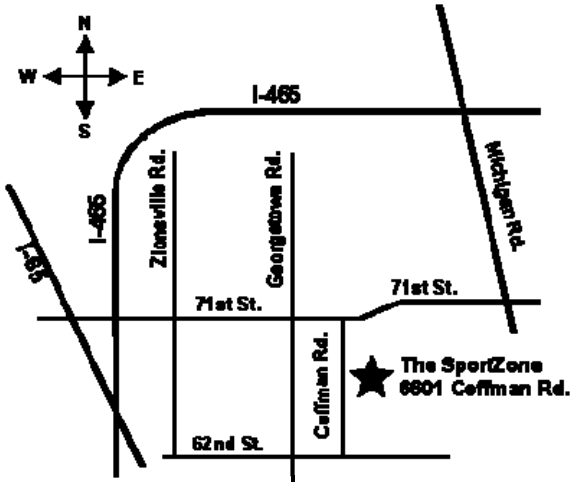
- Developmental Soccer Academy for Boys & Girls Ages 3-14
- Three 6-week Sessions are being offered
- Program is geared to further player skill development and overall knowledge of the game
- Each player will get dozens of touches each training day.
- Training sessions will be staffed by college players and coaches
- Training days will be spent ~50% technical skill training ~50% controlled game play
- Players are to bring their own soccer ball (labeled), gym shoes (for Astroturf play), and outdoor soccer cleats (for play on the SZ indoor FieldTurf soccer field). Players are to wear shorts, T-shirt, and shin guards for each training day.

<u>Schedule:</u>

Session I Fridays 6:30pm – 8:00pm
May 1, 8, 15, 22, 29 & June 1

Session II Fridays 6:30pm – 8:00pm
June 19, 26 & July 10, 17, 24, 31

Session III Fridays 6:30pm – 8:00pm
August 14, 21, 28 & September 11, 18, 25



<u>Where:</u> The SportZone 6601 Coffman Road
Indianapolis, IN 46268 phone: 317-293-2255
www.sportzoneindy.com fax: 317-290-9671

<u>Cost:</u> $75 for 1st child
$60 for each additional child from same household
Teams that register at least 6 players: $60 per player
(all registered players will receive an academy jersey)

<u>To Register:</u> Either call The SportZone 317-293-2255 and register over the phone or fill out the attached registration form and mail to The SportZone (address above). A $50 non-refundable deposit or full payment is required to secure a spot. Don't Wait – spots are limited!!!

For more information contact Judy Grubbs at 317-538-7689 or 317-293-2255 or ggrubbs2@indy.rr.com

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Fill out form & return with payment to The SportZone (address above) Spring-Summer 2009 SportZone Soccer Academy

Player Name _____ Player Age _____ Session(s) (circle): I II III

Parents Name(s) _____ Email Address: _____

Player Gender _____ Player Position _____

Player School _____ Player Club Team _____

Phone Numbers <u>home:</u> _____ office: _____ cell: _____

Address _____ city: _____ state: _____ zip: _____

Special Requests _____

Payment: check credit card (circle one) Card Type _____ (M/C, Visa, AMEX) Card # _____

Card Expiration Date _____

Exact Name on Credit Card _____ Signature _____

The SportZone reserves the right to charge the above credit card without notice for any remaining balance that exists as of the 2nd week of the session. The team is responsible for the bill. Any UNPAID bills could result in player suspensions. Teams pulling out after league schedule has been sent out are responsible for the total registration fee in full.