



Follow us on:



[www.facebook.com/SoccerShotsMemphis](http://www.facebook.com/SoccerShotsMemphis)

**Soccer Shots®** is a uniquely designed program that will introduce soccer to your child in a fun, safe, and controlled environment. Each week, our 30 to 40 minute soccer sessions will offer basic soccer skills, fun games, competitions, and prizes to your child. The program also emphasizes character-forming lessons such as fair team play, individual concentration and cooperation, and encouragement. **Don't miss out on this exciting and rewarding program!**

- Who:** All kids ages 5 to 10!
- Where:** On-site at St. Francis School Extended Care. All equipment provided by Soccer Shots.
- When:** Wednesdays at 3:30pm starting April 6th
- Cost:** \$45 per month
- How:** Register and pay online at [www.soccershots.org/memphis](http://www.soccershots.org/memphis) OR return the Registration Form and a check payable to "Soccer Shots" to the Extended Care office. Please write your child's name in the check's memo section.

**Contact:** Tom Davis at [Tom@soccershots.org](mailto:Tom@soccershots.org) or 901-219-9508

Soccer Shots is committed to having quality, fun instruction at every session. Instructors include collegiate soccer players and other qualified soccer instructors. All instructors use the proven Soccer Shots curriculum and teaching methodologies. In addition, every instructor has passed a criminal background check, and has a child abuse clearance. Soccer Shots is licensed and insured.

All session changes/reschedules (due to weather, holidays, etc...) will be posted on [www.facebook.com/SoccerShotsMemphis](http://www.facebook.com/SoccerShotsMemphis) You do not have to have a Facebook account in order to view the page. If you do have an account, click on the "Like" button to get updates sent to your news feed.

----- Please Return Bottom Section Along with Payment -----  
**SOCCER SHOTS® REGISTRATION FORM**

**CHILD'S NAME:** \_\_\_\_\_ **AGE:** \_\_\_\_\_ **DATE OF BIRTH** \_\_\_\_\_

**School/Daycare LOCATION:** \_\_\_\_\_

**PARENT/GUARDIAN:** \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_

**CITY/STATE/ZIP:** \_\_\_\_\_

**PHONE #:** \_\_\_\_\_ **EMAIL ADDRESS:** \_\_\_\_\_ (Please print clearly)

**SIGNATURE:** \_\_\_\_\_

(Your signature acknowledges you have read and agreed to the waiver on the back of this form)

---

**Agreement to Participate in Soccer Shots®**

Participation in all sports can be inherently dangerous and, regardless of the care taken to avoid injury, it is impossible to ensure the safety of all participating individuals. The game of soccer is no exception. In fact, soccer has many inherent dangers. It is a sport that demands cardiovascular fitness, coordination, and agility. Players may spend more than 45 minutes in intense physical activity and must be constantly aware of their surroundings (other players, goalposts, and the ball itself). Although soccer is not generally thought of as a contact sport, at competitive levels, it is. Although many risks can be avoided, some simply cannot.

While playing soccer, accidents do happen. Some of these accidents may be minor like collisions with other players, collisions with the ground, and being struck by the ball. Other accidents may be more significant like collisions with the goalposts. Other injuries may also include:

- 1) minor injuries like scrapes, bruises, strains, blisters, and sprains;
- 2) more serious injuries like broken bones, concussions, muscle tears, and ligament tears;
- 3) catastrophic injuries like heat stroke, cardiac arrest, and death

To reduce the risk of injury, participants are expected to abide by the following rules:

- 1) all participants are expected to be physically fit before Soccer Shots begins
- 2) all players must adhere to the rules of soccer, thus creating a safe playing environment

The below-mentioned participant agrees to follow the preceding safety rules, all posted safety rules, and all rules common to the sport of soccer. Further, the below-mentioned participant agrees to report any unsafe practices, conditions, or equipment to the Soccer Shots instructor.

I certify that the below-mentioned participant 1) possesses a sufficient degree of physical fitness to safely participate in soccer, 2) understands that he/she is to discontinue activity at any time he/she feels undue discomfort or stress, and 3) will indicate below any health-related conditions that might affect his/her ability to play soccer and he/she will verbally inform the Soccer Shots instructor immediately.

Circle:    Diabetes    Heart Problems    Seizures    Asthma    Other \_\_\_\_\_

I have read the preceding information and it has been explained to me. I know, understand, and appreciate the risks associated with participation in soccer and I am voluntarily participating the below-mentioned participant in the activity. In doing so, the below-mentioned participant is assuming all of the inherent risks of the sport. I further understand that in the event of a medical emergency, Soccer Shots will call EMS to render assistance and that I will be financially responsible for any expenses involved.

**Waiver of Liability:** In consideration of being permitted to play soccer, on behalf of myself, my family, my heirs, and my assigns, I hereby release Soccer Shots and St. Francis, their agents, and their employees from liability for injury, loss, or death to the above-mentioned participant while using any facility or equipment or in any way associated with participating in the activity of soccer now or in the future, resulting from the ordinary negligence of Soccer Shots, its agents and employees.