



PFC SOCCER 2009-10 Indoor Travel Soccer

- Practice Location:** **Force Indoor Sports**
4505 Northfield Road, Warrensville Heights
- Game Locations:** U13 and older, please refer to Coach Paul's letter.
- Practice Days:** See attached *tentative* schedule. Practices times may still change.
- Registration Night:**
Monday
October 5th from 7-8:30 PM
Thornton Park Community Room, 3301 Warrensville Center Road
- Fees:** Please refer to Coach Paul's letter
- Scholarships:** Not available for indoor soccer.
- Questions:** Paul Driesen driesentsa@cox.net
Maria Flack mcflack@windstream.net



Shaker Youth Soccer Association
Premier Football Club
2009-10 Indoor Practice Schedule
 (Includes Travel, **PFC**, Challenge & Clinics)

T E N T A T I V E

FORCE FITNESS -- Northfield			
MONDAY	TUESDAY	WEDNESDAY	THURSDAY
4:00-5:00	4:00-5:00	4:00-5:00	4:00-5:00
Mini-Kickers and K-1	Mini-Kickers and K-1	Footskills & Finishing U12-U14	Challenge Footskills Goalie Clinic U8-U14
High School ??	High School ??		Footskills & Finishing U8-U11
5:00-6:00	5:00-6:00	5:00-6:00	5:00-6:00
Challenge Games	BU8		GU9C
	PFC BU10	PFC BU14 (2)	GU10A
PFC GU10	PFC BU12	PFC GU13 (2)	PFC GU11
PFC BU14 (1)	PFC GU13 (1)	PFC BU13 (2 nd practice will be at Geneva)	PFC BU11
6:00-7:00		6:00-7:00	
GU9B		GU11	
BU9A		BU9B	
BU10A		BU11A	
BU10B		BU11B	
7:00-8:00		7:00-8:00	
GU9A		GU13	
GU10B		BU12A	
GU12		BU12B	
GU14		BU14	



Complete and return this indoor soccer registration form and the waiver form, along with your payment at the Indoor Registration Night:

Mon. October 5th from 7 - 8:30 PM
Thornton Park Community Room
3301 Warrensville Center Road

IF YOU ARE NOT ABLE TO ATTEND THE REGISTRATION NIGHT:

- You may have your forms submitted by another parent
- You may either drop your forms off or mail them to Vivienne Conlon, 3214 Warrington Rd, Shaker Heights, OH 44120 prior to 5 pm on Mon. Oct. 5th,



PFC REGISTRATION FORM	
CURRENT TEAM- please circle GIRLS U10 U11 U13 BOYS U10 U11 U12 U13 U14	CURRENT COACH
PLAYER'S NAME	
PARENT CONTACT INFORMATION	
NAME	
TELEPHONE	
EMAIL ADDRESS	AMOUNT OF Payment Please refer to Coach Paul's letter for amount of your indoor season. Payable to SYSA



PARTICIPANT WAIVER & RELEASE

rev.4/16/09

<i>Participant Name:</i>		<i>Circle One: Player Coach Spectator</i>	
<i>Participant Age & DOB:</i>		<i>DOB:</i>	
<i>Parent or Guardian Name (if Participant is under 18 yrs):</i>			
<i>Contact Info:</i>	<i>Phone:</i> _____	<i>Cell:</i> _____	
	<i>Fax:</i> _____		
	<i>Address:</i> _____	<i>Email:</i> _____	

<i>Club/League:</i>			
<i>Team:</i>			
<i>Date of Signature:</i>			

In consideration of being permitted to practice, play participate in any way, or otherwise use the Force Indoor Sports, LLC indoor athletic Facility at any time after the date of signing of this document ("Activity"), I (the Participant or parent/guardian of the Participant on behalf of the Participant if under the age of eighteen (18) whose signature appears below:

- Acknowledge, agree and represent that I understand the hazardous nature of recreational, competitive and contact sports and that I am qualified, in good health, and in proper physical condition to participate in such activity. I further agree that if anytime I believe equipment or conditions to be unsafe, I will immediately discontinue further participation in the activity
- Fully understand that: (a) ACTIVITIES NOT LIMITED ONLY TO PLAYING SPORTS INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, AND DEATH (RISKS), (b) these risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, or THE NEGLIGENCE OF THE RELEASEES NAMED BELOW, (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time
- FULLY ACCEPT AND ASSUME ALL RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation in the activity.

BY SIGNING THIS DOCUMENT I HEREBY ACCEPT AND ASSUME ALL RISKS, KNOWN AND UNKNOWN, AND ASSUME ALL RESPONSIBILITY FOR THE LOSSES, COSTS, AND/OR DAMAGES FOLLOWING SUCH INJURY, DISABILITY, PARALYSIS, OR DEATH, EVEN IF CAUSED, IN WHOLE OR IN PART, BY THE NEGLIGENCE OF THE RELEASSEES NAMED BELOW.

I HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE Force Indoor Sports, LLC & Force Indoor Sports Richmond, LLC, any of their representatives, administrators, agents, officers, officials, and employees, other participants, any sponsors, advertisers, and if applicable, owners and lessees of premises on which the Activity takes place, (each considered one of the releases herein) FROM LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS; AND I FURTHER AGREE that if despite this PARTICIPANT WAIVER AND RELEASE I, or anyone on my behalf, makes a claim against any of the releases, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which any may incur as the result of such claim. This Waiver and Release shall be continuing in nature, remaining in effect from season to season for as long as the Participant participates in any activity.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OF ASSURANCE OF ANY NATURE AND INTEND IT TO BE COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY THE LAW AND AGREE THAT, IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID, NOTWITHSTANDING, THE REMAINDER SHALL CONTINUE IN FULL FORCE AND EFFECT .

Signature _____

Printed Name _____