



## Georgetown College Women's Soccer

### *Instructional Soccer Clinic*

**Saturday, August 22, 2009**

9:00 a.m. to 1:00 p.m.

**Georgetown College Athletic Complex**

**The Clinic...** features a unique and exciting opportunity for players at all levels to enjoy a day of soccer fun including a variety of skill instruction and games from 9:00am until noon. Daily activities will conclude with the college women's team competing in an intra-squad scrimmage from noon until 1:00pm. **Door prizes and free give-a-ways are also a part of this exciting event!**

**The Instructors...** the 2009 GC Women's Soccer Team

**The Participants...** All Georgetown/Scott Co. Youth Soccer players and Adena FC teams are invited to participate; coaches may also participate with their teams for no additional charge!

**The Cost...** \$10 per player, concessions will also be available during the intra-squad scrimmage at a discounted rate.

**Required Attire...** All participants must wear weather-appropriate shirt, shorts, shin guards, and tennis or soccer shoes. Participants must bring an appropriately sized soccer ball. Water and Gatorade will be provided.

**For Further Information...** Contact Georgetown College Women's Soccer at 502-863-7961 or email [leah\\_castleman@georgetowncollege.edu](mailto:leah_castleman@georgetowncollege.edu)

*Registration will take place at the gate from 8:30 – 9:00am; parent/guardian signature is required upon registration.*

Georgetown College  
Women's Soccer  
400 E College St.  
Georgetown, KY  
40324  
502-863-7961

# 2009 Georgetown College Instructional Soccer Clinic

## Registration and Waiver of Liability

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*Participant Last Name*

*First Name*

*Middle Initial*

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*Mailing Address*

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*City, State, Zip*

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( )

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*Home Telephone*

*Work Telephone*

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*Age*

*Birth Date*

My child has my permission to participate in the Georgetown College Instructional Soccer Clinic. I certify that my child is physically fit and able to participate in such exercise. I hereby expressly agree that my child's participation in this program is at our own risk, no insurance is provided, and I remain responsible in case of accident or injury. I hereby release and hold harmless Georgetown College and the Georgetown/Scott Co. Youth Soccer Association and/or any other affiliate against any claim for any accident or injury arising out of my child's participation.

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*Parent/Guardian Signature Required to Participate*

*Date*