

If you are interested in participating in this program in the summer of 2011, please email your interest to radfordsoccer@gmail.com

2011 RSC Junior Development Program

The purpose of the Radford Soccer Club Junior Development Program is to provide high-level technical instruction to the local youth soccer community. The Program is open to all 4 to 10 year old boys and girls **regardless** of current soccer skill level.

The Program is directed by the Director of Coaching for RSC and utilizes coaching staff comprised of club coaches, collegiate players, and advanced high school players.

The cost for the 2011 RSC Junior Development Program is \$60.00 per participant which includes a T-shirt and admittance to 5 training sessions. **Players are responsible for bringing cleats, a size 4 ball, shin guards, and a water bottle.**

All Training Sessions will be held at Bisset or Riverview Parks. Sessions will begin each Saturday at 9:00 am and end at 10:00 am.

All activities are focused around maximizing the number of touches each player has with a ball – no waiting to perform drills or sitting around listening to lectures. Activities are all game related with the ultimate goal of creating a fast-paced fun environment for each participant.

If you would like to participate in the 2011 Junior Development Program, please complete the form that is part of this flyer. Completed / Signed forms and payment (\$60) should be brought to the first session.

Radford Soccer Club
P.O. Box 1773
Radford, VA 24143
(540) 239-1168
RadfordSoccer@gmail.com
RadfordSoccer.com



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Radford, VA 24143

2011 Junior Development Sign-up

Player: _____
Parent/Guardian: _____
Address: _____
City: _____ Zip: _____
Home Phone: _____
Cell Phone: _____
Other: _____
Email: _____
T-Shirt Size: YS YM YL YXL AS AM
Special Comments: _____

Medical Release Statement:

I hereby give my consent and permission for the player named above to be medically and/or surgically treated for injuries and/or illness of any kind or seriousness under the direction of Academy/Club personnel, until such time as I can be contacted. Further, I give my consent and permission to the physician and/or hospital and/or other health care provider selected to provide medical or surgical treatment, including, without limitation, dental care, hospitalization, injection, anesthesia, invasive surgery or any other form or kind of medical or surgical care (emergency or otherwise) for the player.

Parent or Guardian's Signature Date
Completed and signed form, along with Payment (\$60) should be brought to the first session

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