

## West Des Moines Soccer Club 2010 Spring Break Clinic

Designed as a pre-season camp for **Recreational** and **Select players U-7 through U-14**, the WDMSC Spring Break Clinic is an opportunity for players to get more touches on the ball, play short-sided games and receive age appropriate skills training. Conducted by WDMSC professional coaches, this clinic is both a fun and a valuable skill-enhancing opportunity. **Sign up now, as space is limited.**

**Dates** – March 15, 16, 17 and 18<sup>th</sup> (Monday – Thursday)

**Location** – Stilwell Jr High School gymnasium. In case of inclement weather, call the weather line at 225-8219.

**Family Discount** – if two or more players per family register at the same time, deduct \$5 from each registration.

Ages	Time	Cost
<b>Jr Academy (U7-U10 Recreational)</b>	<b>9:00 am – 10:15 am</b>	<b>\$40</b>
<b>Academy (U9-U10 Academy)</b>	<b>10:30 am – 12:00 pm</b>	<b>\$50</b>
<b>Elite Academy (U11-U14)</b>	<b>1:00 pm – 3:00 pm</b>	<b>\$60</b>

### Pick one of three easy ways to register –

1. Fill out the form below and mail it with your check (made out to West Des Moines Soccer Club) by Wednesday, March 11, 2010, to WDMSC, Attn: Spring Break Clinic, P.O. Box 27008, West Des Moines, IA 50265.
2. Register online by Wednesday, March 11, 2010, at [www.wdmsoccerclub.org](http://www.wdmsoccerclub.org) (go to “programs/camps & clinics” to pay online). Additional fees apply.
3. Bring a check and a completed registration form to the first session of the clinic (if choosing this option, be sure to call the information number listed below before the first day of the clinic to ensure space availability.)

**What to Bring** – All participants must bring an inflated ball, water bottle, shin guards and indoor shoes.

For more information – Visit [www.wdmsoccerclub.org](http://www.wdmsoccerclub.org) or contact John Pearson at 778-6463, [jjpceltic@aol.com](mailto:jjpceltic@aol.com).

## Spring Break Clinic Registration

Check selected session: Jr Academy (\$40)  Academy (\$50)  Elite Academy (\$60)

Name \_\_\_\_\_ Age \_\_\_\_\_ Gender: Male  Female

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone, cell \_\_\_\_\_ Phone, evening \_\_\_\_\_

Email \_\_\_\_\_

(Necessary to inform you of cancellations or rescheduling)

Guardian / emergency contact name and phone \_\_\_\_\_