



# SOCCER FOR JUNIORS

Our Soccer for Juniors program is specifically designed for boys and girls aged 3 to 8 trying the sport for the first time. Learn basic skills from experienced coaches using modified equipment. As sessions are held INDOORS places are limited and for the 3 and 4 year olds each child requires a parent helper each week. No uniform or special equipment is required for our programs and each child receives a soccer ball for them to keep.

Visit www.getactivesports.com.au for more information and our other sports and locations

#### Where

Grange Primary School (Old Gym), 39a Jetty Street, Grange

Term 3
Registrations
are now open!

### **Starts**

Saturday the 26th of July
3 year olds - 9.00am to 9.45am
4 year olds - 9.45am to 10.30am
5 and 6 year olds - 10.30am to 11.15am
7 and 8 year olds - 11.15am to 12.00pm



#### Cost

\$90 for 6 weekly sessions and a soccer ball for you to keep!

To secure your place, you MUST register by one of the following methods:

- Email rego@getactivesports.com.au
- . Phone 1300 772 106
- Fax 1300 672 823



When registering, please let us know the sport and location of your chosen program and your child's name, date of birth and a contact phone number

Once registered bring the completed, signed consent form and payment to the first session.

## GRANGE SOCCER FOR JUNIORS CONSENT FORM - TERM 3, 2014

| Name:                 |  |                   |                            | D.O.I                | B:                         |                        | Male /          | Female     |
|-----------------------|--|-------------------|----------------------------|----------------------|----------------------------|------------------------|-----------------|------------|
| School/Kin            | ndy:   |                   |                            | Email:               |                            |                        |                 |            |
| Phone (Home):         |  |                   | Phone (Mobile):            |                      |                            |                        |                 |            |
| I acknowledge         | nt medical cond<br>that I am required to s<br>my liability for injury in | tay with my child | for the duration o         | of each session and, | if required, will administ | ter any first aid. I h | ereby release ( | Get Active |
| Parent/Guardian Name: |  |                   | Parent/Guardian Signature: |                      |                            |                        |                 |            |
|                       |  |                   |                            | Pay                  | ment Method C              | •                      |                 |            |
| CREDIT                | CARD DETA  | ILS               |                            |                      |                            | VISA/MA                | 4STER <i>CA</i> | RD         |
|                       | No:  | _/                | /                          | /                    | Expiry Date                | ::/_                   |                 | •          |
|                       | Cardholders Name:  |                   |                            |                      |                            |                        |                 |            |
|                       | Signature:   |                   |                            | Amount: \$           |                            |                        |                 |            |
|                       |  |                   |                            |                      |                            |                        |                 |            |

Please have correct money, make your cheque payable to Get Active Sports or complete card details above