



# Pleasanton Rage Girls Soccer Club

## Spring Soccer 2008

- Eligible Participants:** Players entering the Under-9 through Under-13 Age Groups
- Program Description:** Technical skill development through weekly clinics. Small sided play on Saturdays.
- Program Dates:** March 3rd through April 21st (6 weeks of activity – no clinics or Games during Spring Break)
- Location:** All clinics and games will be at Pleasanton Middle School
- Trainers:** Rage Technical Staff
- Registration Fee:** \$125/Player includes T-shirt (Add \$10 for late registration)
- Registration Deadline:** Postmarked by February 20, 2008

Spring Soccer focuses on fundamental skill development. Children are encouraged to experiment with skills in a fun and positive manner. Children will have the opportunity to master basic skills such as Dribbling, Moves to beat an opponent, Passing, Defending, and Finishing. Spring Soccer develops athletic skills, positive attitudes and good sportsmanship.

Players, U9-U13, will be grouped according to 2008 Fall Season league placement. Rage Technical Staff will conduct weekly training clinics. Weekly sessions will focus on a particular topic or skill. Small-sided pick-up games will be held each Saturday. All games and clinics will be held at Pleasanton Middle School. No scores or standings will be kept. Coaching during the Saturday games is to be kept to a minimum. Each team will be assigned a volunteer training assistant who will ensure equal playing time. All games will be refereed.

Due to field availability enrollment space is limited. If more registration is received than the program can accommodate, players will be accepted on first come first serve basis. Group placement and game schedule information will be mailed on March 1 to participants who have provided a return envelope. Information will also be posted at the PGSA web site.

<b>Age Group</b>	<b>Weekly Training Clinic 4:30-6:00</b>	<b>Game</b>
U9-U10	3/3,3/10,3/17,3/31,4/7,4/14	March 8,15,
U11-13	3/4,3/11,3/18,4/1,4/8,4/15	April 5,12,19,26

Questions? Please contact Tamie Grimes at [tamiegrimes@comcast.net](mailto:tamiegrimes@comcast.net) or call 925-209-9983

# Rage Spring Soccer Mail-In Registration

Complete and return by Feb. 20, 2008

For Office Use:

Group: \_\_\_\_\_

Amt. Paid: \_\_\_\_\_

Confirmation: \_\_\_\_\_

Player's Name: \_\_\_\_\_  
Last First

Address: \_\_\_\_\_  
Street City Zip

Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Birth Date: \_\_\_\_\_ School Attending: \_\_\_\_\_ Grade: \_\_\_\_\_

What age group will your daughter be in for the 2008 season? U9 U10 U11 U12 U13

What team did your daughter play on this past season (Fall 2007)? Please circle.

Division 4/Flight Team Name: \_\_\_\_\_

Volunteers: Your help is appreciated! Please write volunteer's name in the area of interest.

Field Manager/Training Assistant \_\_\_\_\_ Referee \_\_\_\_\_

Rage Training Staff will conduct weekly training clinics. Training assistants are needed to help out as well. It's a great opportunity to learn.

## Emergency Information:

Mother's Name: \_\_\_\_\_ Phone (H): \_\_\_\_\_ Phone (W): \_\_\_\_\_

Father's Name: \_\_\_\_\_ Phone (H): \_\_\_\_\_ Phone (W): \_\_\_\_\_

List any medical conditions (Allergies, Asthma, Diabetes, Heart Disease, etc.): \_\_\_\_\_

I hereby give my consent for the above named girl to participate in the Pleasanton Rage Girls Soccer Club's Spring Soccer Program. I assume all risks and hazards that are incidental to the conduct of activities. I further agree to release, absolve, indemnify, and hold harmless this Association, its coaches, officials and employees, the City of Pleasanton and Pleasanton Unified School District of all legal responsibilities. In case of accident and a parent or guardian cannot be reached, I hereby authorize emergency treatment to any qualified physician or dentist for my child hereon identified.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Registration Check List:

- Make check payable to "PGSA Spring Soccer"** for the amount of \$125/player. A \$10 late fee must be added for registration postmarked after Feb. 20, 2008. Late registration will be placed on a waiting list.
- Include a self-addressed stamped envelope.** (Group placement and game schedule information will be mailed to participants in early March, only if self-addressed stamped envelope is provided.)
- Mail** completed registration form, check and self addressed stamped envelope to: PGSA Spring Soccer, PO Box 885, Pleasanton, CA 94566

**Returned Checks:** A \$25.00 service charge is required for returned checks.

**Refund Policy:** Refunds are only given if requested no later than three (3) working days prior to the first session and will incur a \$15.00 service charge.