

**Grand Junction Soccer Club
Fire FC
MONDAY NIGHT FUTBOL**

Monday Night Futbol is a program focusing on skills and small sided games for U5-U10 soccer players, both boys and girls. The skills and games will be taught by the FIRE FC staff and skills trainers at Mesa State Soccer Stadium.

Dates: March 29, April 5, 12, 19, 26 May 3rd
(Make up day for weather only) May 10th

Times:
6:00—7:15 PM
(Please arrive 10 minutes early)

Cost: \$75.00

Location:
Mesa State Soccer Stadium

*******Important Reminder*******

All Players must bring cleats, soccer ball, water, shin guards and soccer ball .

Appropriate uniform (NO pants or Cargo Pants please)

All players must check the Skills Academy Hotline prior to the session for weather updates at 242-4550 or look on the front page of our web site. www.gjsoccer.org

Scholarships and Refunds

GJSC scholarships are available for players in need of assistance. Scholarship applications are available and all requests are strictly confidential. To be considered for a refund, a written request must be submitted to GJSC. A \$20 processing fee and other charges may be retained.

**Monday Night Futbol
U5—U10**



Grand Junction Soccer Club
529 25-1/2 Road, Ste B112
Grand Junction, CO 81505
Phone (970) 242-4550 Fax (970) 242-4971
www.grandjunctionsoccer.com

Player Information

Player's Name _____ Home Phone _____

Address, City, State, Zip _____

Date of Birth _____ Age _____ Grade Level _____ Gender _____

Medical Problem or Concern _____

T-SHIRT SIZE (Circle One size) YS YM YL YXL AS AM AL

Primary Contact Information:

Mother/Stepmother _____ Work Phone _____ Cell _____

Father/Stepfather _____ Work Phone _____ Cell _____

Other Emergency Contact _____ Hm or Wk Phone _____ Cell _____

Email _____

This is to certify that the above player has my permission to play soccer in the Grand Junction Soccer Club. I have listed any known physical or health restrictions on this player's ability to participate in the soccer program. I understand that participation in this activity could result in injury to my child and I do hereby release on behalf of myself and my child, GJSC, its employees and agents, volunteers, members, and officials from any liability. As the parent or legal guardian of the above-named player, I hereby give my consent for emergency care prescribed by a duly licensed Doctor of Medicine or Doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve the life, limb, or well-being of my dependent. GJSC also has my permission to use my child's photo for promotional materials, such as website or registrations. **I have read and accept the GJSC MNF Statement as outlined.**

Parent or Guardian's Signature: _____ **Date:** _____

Payment Information:

Amount \$ _____ Cash _____ Check # _____

Credit Card (Visa, MasterCard, Discover) _____ exp date _____

Authorization Number: _____