

**Clinic Application Form**

Participant Name \_\_\_\_\_

Age \_\_\_\_\_

Grade Entering Fall 2015 \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Emergency contact name/telephone \_\_\_\_\_

E-mail \_\_\_\_\_

Medication/s \_\_\_\_\_

Known allergies \_\_\_\_\_

**Waiver and Consent**

As parent or legal guardian of the child named above, I give my full consent for my child to participate in this clinic. I understand there are certain risks of injury inherent to playing this sport and I assume these risks on behalf of my child. I hereby certify that my child is fully capable of participating in this clinic and that my child is healthy and has no physical or mental disabilities that would restrict full participation in this clinic. I also hereby waive, release, and hold harmless Blue Knights Soccer Clinics, its coaches and representatives for any injury that may be suffered by my child in the normal course of participation in this clinic, whether the result of negligence or any other cause.

Parent / Guardian Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Detach and send this completed application form and payment to David Yanosy, 31 Woodland Drive Southington, CT 06489 (Checks can be made payable to David Yanosy).**

**Make Checks Payable to: David Yanosy**



**BLUE  
KNIGHTS  
BOYS'  
SOCCER  
CLINICS**

**SUMMER  
2015**



\*This is not a sanctioned or sponsored activity by Southington High School or the Southington BOE

## CLINIC INFORMATION

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**Director: David J. Yanosy, Head Coach, Southington High School Boys' Soccer Team**

**Staff: SHS Boys' Soccer Assistant Coaches – Keith Langston, Dave Kowalchuk, Austin Magaro, and Rob Palko**

### Clinic Overview

**This series of soccer clinics will focus on the development of technical skills (passing, trapping, dribbling, shooting) while applying basic tactical concepts. Individual, small-sided, and full-team activities will be used with an emphasis on getting players prepared for the upcoming fall season. Players will be placed in developmentally appropriate settings as they better themselves as soccer players.**

### Player Eligibility

**Boys who will be entering grades 4-9\***

**\*Must be a Southington resident**

### Clinic Dates – 2015

**June 29 – July 2 (Mon. – Thurs.)**

### Clinic Location

**All sessions are 9:00 – 11:00 am at the Southington High School Varsity Grass Soccer Field**

### What to bring...

- Soccer Cleats
- Shin Guards
- Comfortable attire for playing soccer
- Water Bottle
- Soccer Ball

### Registration/Cost

**100\$ for all 4 sessions!**

**You can register 2 ways:**

- 1. Complete application form and send check (payable to David Yanosy) by mail.**
- 2. Reserve your spot by email and bring completed application form and check on the first day of the clinics.**

**\*Registrations are due by Friday, June 19.**

**For more information, Contact David Yanosy (860) 836-7741 [djyanosy@gmail.com](mailto:djyanosy@gmail.com)**

