



Cadillac Area YMCA

(231)775-3369

TEEN FUTSAL® LEAGUE



Modified Indoor Soccer

(Ages 14 – 19, CO-ED)

Draft/ Drop-in Game REQUIRED

Must attend ONE of the following drop-in games to be assigned to a team

Tuesday, January 8 – 5:45 pm

OR

Wednesday, January 9 – 8:00 pm

Cost:

YMCA Members \$35

Community Members \$45

Goalies are FREE! Goalies will be assigned a day/time, NOT a team.

Season: January 15 – March 5

Includes T-shirts in your team's color!

Registration Deadline: January 3rd

Games played on Tuesdays; 6:00 & 7:15 and possibly Wednesdays; 8:00

MUST have Parent Signed registration form
Shin guards required.

Location: Wexford County Civic Center
(Corner of 13th Street and Mitchell Street – Cadillac)



www.futsal.com



www.CadillacAreaYMCA.org

For YMCA **Futsal rules** -YMCA Membership and Financial Aid Information

Cadillac Area YMCA
421 S. Mitchell St.
Cadillac, MI 49601

Participant's Name: First _____ Last _____ Gender M or F Age _____

Date of Birth (if under 18) ____/____/____ Address _____

City _____ State ____ Zip _____ Home Phone _____ E-mail address _____

Daytime Phone (in case of cancellations) _____ Parent(s) Name(if under 18) _____

Teen Futsal Years of soccer experience _____ Highest level of soccer played _____ T-Shirt Size: S – M – L – XL Cost _____

Are you willing to help as a volunteer (with the youth indoor soccer or as a team captain)? YES NO YMCA Member? YES _____ NO _____

This statement must be signed by a parent or guardian if under 18 or by the adult themselves if they are the participant: I certify that my child has permission or that I consent to participate in the above YMCA Program. I further stipulate and agree to protect, indemnify, save, and hold harmless said Cadillac Area YMCA employees and YMCA volunteers against any and all claims arising out of my child's (or my) participation in this YMCA Program. I also certify that the program participant (myself or my child) has been screened medically and that there are no medical conditions or injuries that preclude his/her participation in this program. I give my permission for photos to be taken and used for YMCA public relations purposes.

Signed _____ Date _____

OFFICE USE ONLY	
Pymt. _____	Date _____
Amt. _____	Status _____