

WILKES UNIVERSITY

ATHLETICS

Questions can be directed to Kristi Barsby at (570) 408-4048 or email Kristi.Barsby@wilkes.edu



Mini-Kickers Soccer Clinic

Location: Marts Center Basement (multi-purpose room), 274 South Franklin St.
Ages 4-6 - January 22, 29, February 5, 12, 19 (Tuesdays)
Ages 7-9 - January 24, 31, February 7, 14, 21 (Thursdays)
Time: 6:30-7:30pm
Cost: \$35.00

Each participant should bring a soccer ball.

Return This portion

Name: _____ Age: _____
Address: _____
City: _____ St: _____ Zip: _____
Phone: _____ Email: _____
Insurance Co: _____
Policy #: _____ Group #: _____
Emergency Phone #: _____

I, _____ acknowledge that I have been advised of the risks involved in my son's/daughter's participation in the Mini-Kickers clinic and have been made aware that his/her participation in the clinic may result in injury or harm. I assume responsibility for any and all such risk to my son/daughter. In the event that my son/daughter may sustain an injury as a result of their participation in the camp program, I hereby agree to hold harmless Wilkes University, its directors, officers, coaches, athletic trainers, supervisors, and any other employees or agents there of, for any and all such injuries. I affirmatively certify that to the best of my knowledge, my son/daughter is in good mental and physical health and capable of participating in this activity. I have read and fully understand the contents of this "hold harmless" agreement and execute same voluntary. If requested by Wilkes University Staff, I agree to modify his/her activities as directed.

Parent/Guardian Signature

Date

* Make checks payable to Wilkes University and mail to: Wilkes University, c/o John Sumoski, 84 West South St., Wilkes-Barre, PA 18766

All payments must be received by January 18.