

Program Introduction

Fury Soccer Academies is proud to present a weekly soccer program for boys and girls ages 3-5.

The **Little Kickers Program**, which will be held on the school premises, will teach:

- The basic skills and rules of soccer in a positive and structured environment
- Teamwork
- Sportsmanship
- Social Skills - communication, sharing, listening and cooperation with others



Little Kickers Program



The Country Day School of Arlington

Payment Options

(please check your choice)

- \$55 (one program)
- *\$200*** for Fall Semester (4 programs)
- Auto-pay option**
Your card will be charged automatically for each program without the need to re-enroll. A \$3 processing fee will be assessed.
- Program by Program**
For program to program check or cash payments. This is a commitment to enroll your child for each individual program for that semester. There will be no need to re-enroll for each program.

Please make checks payable to **Fury Soccer Academies**.
Cash & credit cards also accepted.

Staff and Contacts

All coaches are experienced, background checked, fingerprinted, CPR trained, insured and professionally qualified.
For more information contact Coach Preston at 817 240 8826 or email preston.priddy@gmail.com

Program Dates and Times

Every Thursday in four week blocks commencing September 1st from 3.30-4.15pm.

Apparel

Sensible outdoor attire.
No crocs or sandals allowed.

REGISTRATION INFORMATION

Childs Name (First/Last)..... Address.....

Date Of Birth..... Household Phone Number.....

Emergency Contact Name..... Emergency Contact Number.....

Medical Condition..... E-mail.....
(e-mail address used only for program updates and will not be shared with any other source)

METHOD OF PAYMENT (please indicate)

___ Check ___ Cash ___ Money Order ___ Credit Card (a \$3.00 processing fee will be assessed on all credit card transactions)

Credit Card Details

Credit Card Type (please indicate) ___ Visa ___ Mastercard ___ AMEX ___ Discover

Name on Credit Card _____ Credit Card # _____

Expiration Date ___/___/___ Amount to be Charged (add \$3.00 processing fee) \$ _____ Zip Code _____

I agree to pay the above total according to card issuer agreement: Signed _____

For protection of your privacy Fury Soccer Academies LLC stores all personal information under lock and key and will be properly disposed of after 18 months.

I/we as parent/guardian of the above-named child, our agents, representatives, assignees, heirs and successors do hereby waive, release, indemnify, defend and forever discharge Fury Soccer Academies LLC, its officers, agents and employees from and against all claims, demands, actions or causes of actions whether developed or undeveloped, known or unknown, costs, including attorney's fees, arising out of or in any way connected with the activities of the program(s). This is also inclusive when opting for automated billing, when checks are presented without the respective enrollment form and enrollment for entire semesters. I also hereby give consent for emergency medical care to be given under any conditions necessary to preserve life limb and well-being of the above named child.

I understand that Fury Soccer will attempt to make up for any time lost due to bad weather. However if time cannot be made up, I understand that no refund will be provided. All bookings are non-refundable.

Signed parent/guardian..... Date.....