



Junior Kicks Soccer

Soccer programs for boys and girls
Grades K-5

In partnership with
Mission Montessori School

Spring Session (January, February, March, April, and May)

What is Junior Kicks Soccer?

Junior Kicks Soccer is designed to develop confidence and a love of soccer through our fun and unique program. A games based approach to learning is used to teach the essential skills of soccer. Junior Kicks is a natural progression from our Little Kicks Soccer program.

Soccer Program Features

- 45 minute sessions (Fourteen week program)
- Innovative, dynamic and fun activities in a structured but nurturing environment
- Staffed by professional coaches

Equipment

- Participants should wear tennis shoes - we bring the equipment

Junior Kicks Soccer for Mission Montessori School

Location/ Cross Streets	Day	Times	Dates	Cost	Code	Notes
Mission Montessori School 96th Street Campus	Monday	2.45-3.30pm	Jan 7 - May 19	\$195	A104	Grades K-5 16 classes

- We require a minimum of 8 children to conduct the program
- Dates Jan 7, 14, 28, Feb 4, 11, 25, Mar 3, 17, 24, Apr 7, 14, 21, 29, May 5, 12, 19 (No Jan 21, Feb 18, Mar 10)
- Our soccer programs are conducted year round - call the office **(480) 585 7684** or visit our web site **www.KicksKids.com** for details

Registration Form

Please complete form and mail to: **Kicks Kids, PMB 250, 21001 N Tatum Blvd., Suite # 78-1630, Phoenix AZ 85050**

Participant Information (please print clearly)

Name _____ Code _____

Date of Birth ____/____/____ Age _____ Sex M / F

Parent Information (please print clearly)

Name _____

Street _____

Phone (home) _____

Please provide an email address that is checked regularly **(please print clearly)**

Emergency Contact _____

Participant Information (please print clearly)

Name _____ Code _____

Date of Birth ____/____/____ Age _____ Sex M / F

City _____ State _____ Zip _____

Phone (cell) _____

Email _____

Emergency Phone _____

Please include relevant medical information in writing with this application

I certify that my child(ren) above is / are in excellent health and are able to participate in physical activity, including soccer. I agree to hold Kicks Kids Enterprises, it's agents, employees and contractors harmless from any and all claims for injuries sustained during my child(ren)'s participation in the program. Permission is granted for my child to receive emergency medical treatment. I grant permission for, and waive any rights to, the use of photographs and motion pictures at any events and their subsequent use in Kicks Kids Enterprise's information.

Signed _____ Date _____

Promotion

In an effort to improve our customer service, please complete the following section, **how did you hear about us?**

Word of Mouth School _____ Periodicals _____ Other _____

Credit Policy

A credit voucher for full program fee will be issued for any cancellation prior to program. Every attempt will be made to make up sessions lost to bad weather. If your child misses a session or it is cancelled, they can make up time on other programs. We do not offer cash refunds.

Discount Policy

Family Discount - \$5 discount per child after 1st child has paid in full

Equipment

T Shirt - \$12 Soccer Ball - \$15 Shinguards - \$12

Payment

Total Cost \$ _____ Checks payable to 'Kicks Kids' - (Program cost, **\$10 walk on fee added to registration not received by Jan 6th**, Equipment cost).

Confirmation

Please note that your cleared check is confirmation of your registration!

Office Use

Rec.

Pay.

Comp.