



DEVELOPMENT LEAGUE

NOW ACCEPTING APPLICATIONS FOR

FALL/WINTER 2013-14

YOUTH INDOOR MINI-SOCCER FOR BOYS & GIRLS, BIRTH YEARS 2003-2011

BORN	GROUP	DAYS	TIMES
NEW! 2010/11	Parent & Tot	Sat	9:30-10am
2008/09	Co-ed	Sat	Between 9am - 12pm
2006/07	Co-ed	Sat	Between 9am - 12pm
2005	Co-ed	Sat	Between 9am - 12pm
2003/04	Girls	Sat	Between 9am - 12pm
2003/04	Boys	Sat	Between 9am - 12pm

- 12 weeks of scheduled games per Session (Session 1 is Oct 5 - Dec 21, Session 2 is Jan 11 - Apr 5)
- 1-hour games
- All games on Burloak Sports Centre's state-of-the-art turf!
- Certified and paid coaches
- Team jersey, and end of season awards included
- Teammate requests will be considered until Sept 15

PRICING FOR THE 2003-2009 BORN PROGRAMS

\$195

 All-in (Compare at \$172.57+HST)
Per Session

FOR THE 2010/11-BORN PARENT & TOT PROGRAM: \$105

 All-in (Compare at \$92.92+HST)
Per Session

STATE OF-THE-ART TURF



NEW PARENT & TOT GROUP!
 - FUN half hour sessions
 - The focus is on making players comfortable with the ball

LOCATION:



952 CENTURY DR., BURLINGTON, ON L7L 5P2

Head Instructor: **Shawn Faria**

- Soccer Scholarship, University of Louisville, Team Captain
- Professional playing experience: Toronto Lynx, Team Captain
- Trained with 2nd Division Team in Portugal-Fatima
- Provincial B License
- Oakville S.C. Mentor Coach & Academy Coach
- Winstars Soccer Academy, Girls Academy Director

Registration forms are available online at

burloaksoccerclub.com

or at the Burloak Sports Centre.

Contact us @ 905-631-0000 ext. 200
or kristin@burloaksportscentre.ca



REGISTRATION FORM (Please print)

Once completed, please fax to 905-631-0001 or drop off at Burloak Sports Centre (952 Century Dr., Burlington, ON L7L 5P2)

SUPER STRIKERS DEVELOPMENT LEAGUE - FALL/WINTER 2013-14

Participant's Name: _____

Parent/Guardian Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Home Phone: _____ Cell Phone: _____

Participant's Date of Birth (yyyy/mm/dd): _____ / _____ / _____ Sex: Male Female

E-mail: _____

Request to play with: _____

Teammate requests will be considered until September 15.

How did you hear about this program?: _____

Level of Soccer played last year:

- Did not play
- House League
- Rep
- Other _____

★ Which Age and Session(s) are you registering for?:

<input type="checkbox"/>	NEW! 2010/11	Parent & Tot	Sat	9:30-10am
<input type="checkbox"/>	2008/09	Co-ed	Sat	Between 9am - 12pm
<input type="checkbox"/>	2006/07	Co-ed	Sat	Between 9am - 12pm
<input type="checkbox"/>	2005	Co-ed	Sat	Between 9am - 12pm
<input type="checkbox"/>	2003/04	Girls	Sat	Between 9am - 12pm
<input type="checkbox"/>	2003/04	Boys	Sat	Between 9am - 12pm

Session 1: Oct 5 - Dec 21

Session 2: Jan 11 - Apr 5

Pricing: 2003-2009 born Programs **\$195.00 All-in** (Compare at \$172.57+HST)

(Per Session) 2010/11-born Parent & Tot Program **\$105.00 All-in** (Compare at \$92.92+HST)

Payment Options: Cash Cheque (Payable to Conacher Athletics Club) Visa MasterCard

Credit Card #: _____ **Expiry:** _____ / _____

REGISTRATION CANCELLATIONS ARE SUBJECT TO A \$25 SERVICE CHARGE.

THE UNDERSIGNED IS RESPONSIBLE FOR THE CONDUCT OF THE PLAYER WHILE PARTICIPATING IN THIS PROGRAM. THE PLAYER SHALL BE GOVERNED BY THE RULES ESTABLISHED BY 2212336 ONTARIO LIMITED. MISSED CLASSES WILL NOT BE REIMBURSED. IT IS UNDERSTOOD THAT THE UNDERSIGNED PERSON OF LEGAL AGE OR LEGAL GUARDIAN SHALL NOT HOLD 2212336 ONTARIO LIMITED OR THEIR INSTRUCTORS, ADMINISTRATORS, OFFICIALS, OR THE FACILITY USED LIABLE IN THE EVENT OF INJURY OR LOSS IN ANY MANNER WHATSOEVER. I SPECIFICALLY WAIVE, GIVE UP AND RELEASE 2212336 ONTARIO LIMITED, ITS RELATED COMPANIES AND THEIR STAFF FROM ALL LIABILITY FOR ANY CLAIM FOR DAMAGES WHICH I MAY HAVE RELATING TO INJURIES OR ILLNESS THAT MY CHILD MAY SUSTAIN. BY SIGNING THIS WAIVER, I ALSO CERTIFY THAT MY CHILD IS IN GOOD HEALTH, WITH NO CHRONIC ILLNESS OR ABNORMAL TENDENCIES. THE PLAYER LISTED ABOVE IS REGISTERED UNDER THE CARE OF THE UNDERSIGNED AND ASSUMES ALL RISKS THROUGH ENROLLMENT IN THIS PROGRAM WHICH CONSISTS OF PHYSICAL INTERACTION CAPABLE OF INJURY. THE PLAYER MUST WEAR ALL APPROVED SOCCER EQUIPMENT INCLUDING SHIN PADS. I HAVE READ AND UNDERSTAND ALL ITEMS ON THIS PLAYER FORM. I THE UNDERSIGNED AGREE TO ALLOW 2212336 ONTARIO LIMITED AND/OR ITS RELATED COMPANIES TO USE THE PARTICIPANTS' NAMES AND OR PICTURES FOR ADVERTISING PURPOSES.

Parent/Guardian Signature: _____ **Date:** _____