



Parent & Me Soccer

Who: Children ages 3-5

When: Tuesdays April 3 – April 24, 6:00PM - 7:00PM

Where: Hoover Ridge Park, field below Red Barn

Cost: \$25/child

This program teaches basic soccer skills to children ages 3-5 and incorporates the parents in the learning process. Participants, with the assistance of a parent, will learn to pass, dribble, trap, kick and throw a soccer ball. Participants begin the class learning skills with a parent, then progress to doing the same skills with another participant. The class offers a safe and non-competitive way to learn basic skills necessary to play soccer. This class is designed to teach soccer for children not quite ready for competitive play.

Participants should wear comfortable clothing and shoes (nothing open-toed or Crocs). Cleats and shin guards are not necessary. Parents should be prepared to participate and dress accordingly. Please bring water bottle.

Register on attached form and turn it in to the Parks and Recreation office on Hoover Ridge or contact Lindsay Von Herbulis (svonherb129@gmail.com) for arrangements.

Frequently Asked Questions:

Q: I have two children. Can they both do the class?

A: The class does work best with one adult per child, but it can work with two.

Q: Will there be games?

A: There will be no game play. Participants will only do drills and activities to introduce them to soccer.

Q: What if it rains?

A: Parents will be notified by 5:30PM on the day of activity, first via e-mail. There will be no make-up days, but we can extend the length of remaining classes.

*Limit 16 children per class.

*This is not a MCPS sponsored activity.

*Lindsay Von Herbulis is the instructor for this activity.



Madison County Parks and Recreation

Youth Sports Registration

Sport: _____ If Applicable: Boys' or Girls' or Co-ed Team (circle one)

Participant's Information:

First name: _____ LastName: _____ Date of Birth: ____/____/____

Street Address: _____

City/State/Zip _____ Telephone: _____

Gender: M / F Years of Experience: _____ Last Club/Team: _____

Medical Conditions: _____

Other information that may help with draft: _____

Parent/Guardian's Information

First name: _____ Last Name: _____ Email Address:(Preferred) _____

Home Phone: _____ Cell Phone: _____ Cell Phone: _____

Mailing Address: (if different from above) _____

I am interested in: Coaching _____ Asst. Coaching: _____ Other (Specify) _____

Emergency Contacts:

Name: _____ Phone Number: _____

Name: _____ Phone Number: _____

REMEMBER: THIS PROGRAM IS FOR CHILDREN!

For the opportunity to be a part of this program I understand that I am responsible for my conduct and my child's conduct at all times. I will not berate, curse, defame or confront a coach, participants, other coaches, umpires or referees, or anyone associated with the youth program or allow my child to do so. Parent/Guardian is responsible for following the rules and regulations of a suspension from the participant's school. The Participant will not be allowed to participate in Madison County Recreation Authority Programs/Sports/Events if they are suspended after school hours from their school or excluded from extra-curricular activities due to their suspension from their school. I understand that if I violate any of the above, I can be suspended from being at practices/games by the sport's commissioner. I am WAIVING and RELEASING all claims for myself and my minor child/ward (participant) arising out of such registration and participation.

Parent/Guardian's Signature: _____ Date: _____

Participant's Signature: _____ Date: _____

Registered By: _____ Fee Collected: _____