



# MILTON

## MINI MITE SOCCER • AGES 3&4 COED

## MIGHTY MITE SOCCER • AGES 5&6 COED

# SOCCER

sponsored by



**Early Registration** ..... Jan. 8 - March 18  
**Late Registration** (\$10 T-shirt) .. 3/19-3/25  
**Practices Begin**..... Week of April 2  
**First Game**..... April 14  
**Last Game**..... May 12  
**Registration Fee:**

**\$30 Member**  
**\$60 Non-Member**  
 (T-shirt included w/early registration)  
**Refunds may only be issued if**  
**the YMCA cancels a program**

### GENERAL INFORMATION

- One practice per week. All practices and games are held at the Mercy Sports Complex at the Parker YMCA.
- All games are on Saturdays.
- Financial Assistance is available for participants in need.
- Divisions: Mini Mite: Ages 3 & 4 COED; Mighty Mite Ages 5 & 6 COED

**COACHES WANTED:**

The Volunteer Coach is the most important key to a successful season. We are always looking for talented and dedicated adult volunteers to serve as volunteer coaches.

**Parents will be contacted after coaches meeting.**

For More Information Contact Trent Henning 754-9622 ext. 114 or thenning@ymcajanesville.org

### YMCA OF NORTHERN ROCK COUNTY

Downtown Janesville - 608.754.YMCA - 221 Dodge St. Janesville, WI 53548  
 Parker - 608.868.YMCA - 1360 Parkview Dr. Milton, WI 53563  
[www.ymcajanesville.org](http://www.ymcajanesville.org)

## Milton Mini Mite and Mighty Mite Soccer Registration Form—One Form Per Person

Register by mail, in person or fax credit card information to 608-754-9024 attention Trent Henning.

Child's Name: \_\_\_\_\_ M / F  
 School: \_\_\_\_\_ Grade: \_\_\_\_\_ Age: \_\_\_\_\_ Birth Date: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_ Contact Number: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Email Address: \_\_\_\_\_  Member  Non-Member

**Please Mark the Division Your Child Is In (age as of 6/8/16):**

- Mini Mite (ages 3-4)  Mighty Mite (ages 5-6)

**SHIRT SIZE:** 3T 4T Child S (6-8) Child M (10-12) Child L (14-16) Adult S Adult M Adult L Adult XL

**SHIRTS WILL BE HANDED OUT BEFORE 1ST GAME**

If you would like to be placed with a specific coach or on a specific team please let us know in the space provided.

**Special Requests cannot be honored if registration is received during late registration periods.**

**SPECIAL REQUEST:** \_\_\_\_\_

**I WOULD BE WILLING TO VOLUNTEER AS A:**  Coach  Assistant  Official

Name: \_\_\_\_\_ Phone: \_\_\_\_\_



<p><b>Payment Method</b></p> <p><input type="checkbox"/> Cash (in person only)</p> <p><input type="checkbox"/> Check # _____</p> <p><input type="checkbox"/> Credit Card <input type="checkbox"/> Visa <input type="checkbox"/> Master Card</p>	<p>Name on Card _____</p> <p>Card # _____</p> <p>Expiration Date _____</p> <p>3-Digit Verification Code (on back of card) _____</p> <p>Signature _____</p> <p><b>AMOUNT ENCLOSED</b> _____</p>
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