



CSA --DEVELOPMENTAL SOCCER CLINICS

Winter 2019

Sponsored by the Town of Southeast - Recreation Department

Programs: *Please register early. 14 maximum / Class – 10 weeks Program*
Full classes / Availability will be updated every Monday on our website below.

Little feet (5 - 6yrs Only) Cost \$199.

Monday: 5 - 6pm – Open

Jan 7, 14, 21, 28 OR
Feb 4, 11, 25
March 4, 11, 18,

2 Classes – 14 Players Max

Friday: 5 to 6pm– Open

Jan 11, 18, 25
February 1, 8, 15
March 1, 8, 15, 22

Young Kickers (7 - 9yrs Only) Cost \$199.

Monday: 5 - 6pm – Open

Jan 7, 14, 21, 28 OR
Feb 4, 11, 25
March 4, 11, 18,

2 Classes – 14 Players Max

Friday: 5 to 6pm– Open

Jan 11, 18, 25
February 1, 8, 15
March 1, 8, 15, 22

Junior Kickers (10 - 13yrs) Cost \$199.

Monday: 5 - 6pm– Open

Jan 7, 14, 21, 28 OR
Feb 4, 11, 25
March 4, 11, 18,

2 Classes – 14 Players Max

Friday: 5 to 6pm– Full

Jan 11, 18, 25
February 1, 8, 15
March 1, 8, 15, 22

CSA Advance Training (Travel Teams U13, U14 / Varsity players) Cost \$199.

Tuesdays: 5:30 to 6:30pm – Open

Jan 8, 15, 22, 29 February 5, 12, 26
March 5, 12, 19

****Register and Pay by NOV 15th - \$199 After NOV 25th - \$225****

For more information's and program details, please visit our website: www.southeast-ny.gov
Phone 845-279-2915 - Town of Southeast Rec Dept: Phone 845-279-3915

Payment should be made out to Town of Southeast

Mail to: 1 Main Street, Brewster, NY 10509

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Mail or drop off at: Town of Southeast Recreation Department
1 Main Street / Brewster, New York 10509
phone #: (845) 279-3915 / Fax#: 845-279-3137
E-mail: recreation@southeast-ny.gov
website: www.southeast-ny.gov

Please register early.

Please circle program/days desired: [Little Feet – U6 Mon (5pm) Fri (5pm)]. – [Young Kickers – U9 Mon (5pm) Fri (5pm)] [Junior Kickers – U12 – Mon(5pm) Fri (5pm)]
CSA Travel Advance U15 -U17 Tue (5pm)

Program: _____ Days: _____ Circle: Male
/Female

Name: _____ Team _____

Address: _____ City: _____ Zip _____

Parent / Guardian#: _____ Cell #: _____

School: _____ Grade (presently in): _____ Age: _____ DOB: _____

Fee: _____ Cash: Check: Online: _____

Emergency Contact: _____ Phone _____

EMAIL ADDRESS: _____

_____ has my permission to participate in the CSA / Southeast Recreation Program. I assume all risks and hazards incidental to such participation including transportation to and from activities. I do here by waive, release, absolve, indemnify and agree to hold harmless the sponsors and coaches for any claim arising out of n injury to my child. I also understand that it is my responsibility to notify the coach of any medical/physical condition that could limit adult and child's participation or that requires special attention.

SIGNATURE: _____

The Brewster Central School District neither sponsors nor endorses this event or organization. This information is distributed in line with the District's policy to provide information regarding activities of general public interest which promote the education or other best interests of the students. Questions regarding this event or activity should be directed to the organization, not the District.