

Winter 2011-2012 Youth Indoor Futsal League

Two 7-week Sessions!

Boys and Girls!

Futsal is a great skill-developer, demanding quick reflexes, fast thinking, pin-point passing and an exciting game for all ages!



Sunday Games!!

Keep up your skills this winter!

WINTER SESSION I

November 18, 2011 - January 15, 2012
(No Games: 11/24, 12/24 -1/1)

WINTER SESSION II

January 13, 2012 - March 4, 2012

YOUTH LEAGUE (BOYS & GIRLS)

\$620.00 per team/per session

- U09/10
- U11/12
- U13/14
- U15-17

LEAGUE LEVELS

Boys

- NCSL 1-3
- NCSL 4-6/Classic
- Recreational

Girls

- WAGS 1-3
- WAGS 4-6/Classic
- Recreational

SPACE IS LIMITED! SIGN UP TODAY!!



WINTER 2011-2012 FUTSAL SOCCER LEAGUES

Registration Form

Please complete form below and mail or fax with payment to:
 Discovery Sports Center, 18031 Central Park Circle, Boyds, MD 20841 / Fax: 301-540-4276

(PLEASE CHECK YOUR LEAGUE AND SESSION)

LEAGUE	SESSION I OR II	
U09/10 Boys	<input type="checkbox"/> Session I	<input type="checkbox"/> Session II
U09/10 Girls	<input type="checkbox"/> Session I	<input type="checkbox"/> Session II
U11/12 Boys	<input type="checkbox"/> Session I	<input type="checkbox"/> Session II
U11/12 Girls	<input type="checkbox"/> Session I	<input type="checkbox"/> Session II
U13/14 Boys	<input type="checkbox"/> Session I	<input type="checkbox"/> Session II
U13/14 Girls	<input type="checkbox"/> Session I	<input type="checkbox"/> Session II
U15 -17 Boys	<input type="checkbox"/> Session I	<input type="checkbox"/> Session II
U15 -17 Girls	<input type="checkbox"/> Session I	<input type="checkbox"/> Session II

LEAGUE LEVEL
(Please select a league level)

NCSL 1-3

NCSL 4-6 /Classic

WAGS 1-3

WAGS 4-6 /Classic

Recreational

GAME TIMES

U09-14:
(Sunday)

U15-17:
(Sunday)

Team Information

Team Name: _____

Coach/Captain Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: h) _____ (w): _____ (c): _____

Email: (mandatory) _____

Payment Information (\$620/team) Team must submit one payment. Fees includes all referee fees & tax.

Credit Card: (circle) Visa MasterCard

Card Number: _____ Exp. _____ Amt: _____

V-Code: (3-digit # on back of card): _____ Zip Code: _____

Signature of Card Holder: _____

Check: (Made Payable to Discovery Sports Center) Number: _____ Amt: _____

Cash: All cash payments must be made in person.

Refund Policy: There is a \$50 non-refundable administration fee.
 Team registrations are accepted on a first come first serve basis until leagues are filled.
 Players must only be rostered & play on one team the same league.