

# Owensboro Catholic Soccer League

Practice: Every Wednesday  
Time: 5:00-6:00 PM  
Games: 4 Sundays  
Time: 6:30-8:00 PM  
At: Owensboro Catholic High School



## Girls and Boys in Kindergarten, 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup> and 4<sup>th</sup> grades

- Organized by Owensboro Catholic School coaches and volunteers.
- Instruction on Wednesdays and Scrimmages on Sunday evenings this Fall.
- First session begins on Wednesday, August 17. Please check the school website for times. It will be updated shortly.
- Practice will consist of ball movements and control as well as some fun activities with the ball that will encourage players to train outside of practices.
- Games on 4 Sunday evenings at 6:30 PM
  - August 28
  - September 11
  - September 18
  - September 25
- Registration forms will be available online. Registration forms will also be available in the newsletter. Forms need to be sent to the OCHS office, Central Office or brought to the first session.
- Cost - \$40 for first child and \$30 for each additional child (Free OC soccer T-shirt)
- Should not interfere with other athletic commitments.
- All athletes that finish the season will receive a participation medallion.

## **Must have.....**

- School physical on KHSAA form before the first session
- Size 4 ball
- Shin guards
- Water bottle
- Black shorts
- Positive attitude!!

For more information, please e-mail Coach Dan Goodwin at [GOODWINDR@omu.org](mailto:GOODWINDR@omu.org) or Coach Durand Engineer at [durand.engineer@owensborocatholic.org](mailto:durand.engineer@owensborocatholic.org)



**Owensboro Catholic Elementary School**  
**Kindergarten, 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup> and 4<sup>th</sup> Grades**  
**2011 Girls and Boys Soccer Program**

**Student Information:**

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 Grade \_\_\_\_\_ Phone #'s \_\_\_\_\_  
 School \_\_\_\_\_ Parents Name \_\_\_\_\_  
 E-mail Addresses \_\_\_\_\_  
 Experience (Circle all that apply):      Rec.      Select.      None

**Medical Information:**

Height \_\_\_\_\_ Weight \_\_\_\_\_  
 Insurance (Yes/No) \_\_\_\_\_ Company \_\_\_\_\_ I.D. # \_\_\_\_\_  
 Health Problems \_\_\_\_\_

**In compliance with State Law all student athletes are required to have a medical physical on file in the principal's office BEFORE they can participate. Physicals must be on a "KHSAA FORM"**

**WAIVER CLAUSE:** (Applies to all participating Athletes)

*The above named individual has our/my permission to participate in the athletic program sponsored by the OCCSS. We/I understand that no insurance is provided by the OCCSS, the individual school athletic department or any individual connected with the program. We/I agree to release from responsibility and to hold blameless the OCCSS, School Athletic Department or any individual who is assisting in the sports program sponsored by the OCCSS for any injury or sickness resulting from participation in the sports program.*

**Parent/Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Would you (parent/guardian) like to volunteer? Yes or No, Name \_\_\_\_\_

**Students Shirt Size (please circle one):**      YS    YM    YL    AS    AM    AL

*We agree to keep the equipment assigned to us clean and repaired to the best of our ability. We agree to replace equipment assigned to us that is lost, stolen or abused by us.*

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**This application is for all Girls or Boys in KG, 1<sup>st</sup>, 2<sup>nd</sup> 3<sup>rd</sup> and 4<sup>th</sup> grade that want to participate in the Developmental Soccer Program. If you have any questions please contact Coach Dan Goodwin at**

**[GOODWINDR@omu.org](mailto:GOODWINDR@omu.org) or Coach Durand Engineer at [Durand.engineer@owensborocatholic.org](mailto:Durand.engineer@owensborocatholic.org)**

**Registration Fee: \$40 for first child and \$30 for each additional child.**

**Checks payable to OCHS**