



SACRAMENTO YOUTH SOCCER LEAGUE 2012 F Coach Clinic Registration Form

(Check One Box)

April 27,28 ~ River Park

To register and be accepted to the clinic, **ALL 4 ITEMS MUST BE COMPLETED:**

1. Verify that one of the clinics listed above is check marked
2. Include a \$45 check (payable to SYSL)
3. Include a stamped, self-addressed envelope
4. Mail form, check, self-addressed stamped envelope, to:

Mike Canty, Coaching Coordinator
Sacramento Youth Soccer League
5021 Sandburg Drive
Sacramento, Ca. 95819

Name: _____

Address: _____

City: _____

State: _____ Zip: _____ E-mail _____

Phone: (Day) _____ (Evening) _____

Your Club: _____

Applicants will be notified of their acceptance into the selected course seven days prior to the tentative course date. Directions to the clinic location will be provided.

Approved By: _____ (SYSL Coaching Coordinator)