



# DYNAMO JRS TRAINING ACADEMY



1<sup>st</sup> Players Name: \_\_\_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_ Age: \_\_\_\_\_ Boy / Girl

2<sup>nd</sup> Players Name: \_\_\_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_ Age: \_\_\_\_\_ Boy / Girl

Address: \_\_\_\_\_ City \_\_\_\_\_ TX Zip \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_ @ \_\_\_\_\_

**Please initial each one: \_\_\_\_\_ NO REFUNDS \_\_\_\_\_ NO CREDIT FOR MISSED OR SKIPPED SESSIONS**

I, the undersigned, release Mcallen Youth Soccer Association, Dynamo Jrs and associated personnel from liability due to injury or losses incurred while at training.

Name of Parent: \_\_\_\_\_ (please print)

6:00-7:00pm

Signature of Parent: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

Ages: 3-12  
years Boys and  
Girls

All training will be at De Leon Soccer Fields 29<sup>th</sup>/Nolana  
Players need to bring: soccer ball & shoes/shin guards/water

\$30.00 Session 1: Feb 8,15,22, 29

\$25.00 Session 2: Mar 7, 21, 28  
no training spring break week

\$30.00 Session 3: Apr 4, 11, 18, 25

*\*3 Year olds: We will ONLY take 10 players per session*

**Office Use only:**

Session 1:\$ \_\_\_\_\_ Session 2:\$ \_\_\_\_\_ Session 3:\$ \_\_\_\_\_

Received payment by: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

Method of payment: (circle one)

Cash    Check# \_\_\_\_\_    Visa    MasterCard    American Express    Discover

**MYS A 4311 N. 10<sup>TH</sup> ST. STE A MCALLEN TX 78504 956-631-0431 Fax 956-631-9514**  
[www.mysasoccer.com](http://www.mysasoccer.com) [mcallyouthsoccer@hotmail.com](mailto:mcallyouthsoccer@hotmail.com)