



# FIRST ANNUAL PRE SEASON KICK OFF



**Magic Soccer Club** is proud to announce their first annual pre season kick off. This event will prepare players for the fall soccer season. It is a great way to work on your individual skills and teamwork. We will provide two separate weeklong programs where players can attend as an individual or with their team. Both these events will be held at Country Grove Park.

## AUGUST 11 - 15 INDIVIDUAL SKILL IMPROVEMENT

This week will focus on the individual player. We will work on; foot skills, dribbling, juggling, moves, passing, shooting, etc. At the end of the week the players will have a better understanding of what to do with the ball.

U7/U8	9:00 AM - 10:15 AM	cost: \$25 for <b>MAGIC</b> / non members \$35
U9/U10	10:45 AM - 12:00 AM	cost: \$25 for <b>MAGIC</b> / non members \$35
U11/U12	3:00 PM - 4:30 PM	cost: \$30 for <b>MAGIC</b> / non members \$40
U13/U14	1:00 PM - 2:30 PM	cost: \$30 for <b>MAGIC</b> / non members \$40

## AUGUST 18 - 22 TEAM SKILL WORK

This week we will focus on working as a team. As a team we will look at our team shape, how to work together, passing and moving, communication, etc. At the end of the week your team will have a better understanding of how to work together as a team. Coaches of the team are welcome to participate with their team and provide topics they wish the team to work on.

U7/U8/U9	(75 minutes)	cost per team \$300 for <b>MAGIC</b> / non member teams \$400
U10 and up	(90 minutes)	cost per team \$350 for <b>MAGIC</b> / non member teams \$450

Time slots available:	9:00 AM - 10:30 AM	10:45 AM - 12:15 PM	12:45 PM - 2:15 PM
	2:30 PM - 4:00 PM	4:15 PM - 5:45 PM	6:00 PM - 7:30 PM

## HOW TO SIGN UP?

Please e-mail your name, team name, contact person, phone number, and time slot to: [coachdirector@magicsoccer.org](mailto:coachdirector@magicsoccer.org). You can bring your check (made payable to **MAGIC SOCCER CLUB**) and your waiver to the first day of training.

Players can sign up for both weeks- as an individual player the week of August 11, and the week of August 18<sup>th</sup> with their team. Make sure that you bring to each training the following: a soccer ball, shin guards, water bottle, and wear proper soccer clothing

If you have questions or your son/daughter cannot make a specific time slot, please e-mail: [coachdirector@magicsoccer.org](mailto:coachdirector@magicsoccer.org) or call **608-698-3464** and we can discuss your situation.

**FIRST ANNUAL  
PRE SEASON  
KICK OFF  
2008 Application/Waiver Form**

Please make checks payable to: Magic Soccer Club

Please email Danny Von Mol at [coachdirector@magicsoccer.org](mailto:coachdirector@magicsoccer.org) to reserve your spot.

Player's Name \_\_\_\_\_ ? M ? F  
Age of player \_\_\_\_\_  
Team Name \_\_\_\_\_  
Parent's Name \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
Phone (home) \_\_\_\_\_  
(cell) \_\_\_\_\_  
E-mail Address \_\_\_\_\_

Individual Skills Improvement:      Age Group \_\_\_\_\_ Time \_\_\_\_\_

Team Skill Work:      Age Group \_\_\_\_\_ Time \_\_\_\_\_

I hereby specifically agree to hold harmless the sponsors, directors, agents, and members of the same from any and all liability, injury, or loss arising out of or occurring in the course of participation in this camp or the use of the facilities related to this camp. I certify that this participant is able to participate in all camp activities. In case of emergency I grant permission for my son/daughter to be given emergency treatment at a local hospital.

\_\_\_\_\_  
Parent Signature or Guardian

\_\_\_\_\_  
Date