

Soccer Clinic 2018



Grades 1-6 (Fall 2018)

Alex Horne, Bromfield Boys Varsity Soccer Coach

Kathryn Hayward, Bromfield Girls Varsity Soccer Coach

Assisted by members of the Bromfield Girls and Boys Varsity teams

Let's play soccer! Come enjoy a fun time with your friends while working on ball handling skills, shooting, game strategy, and more! Learn new skills, work on improving skills! Players of all skill levels are welcome!

August 20-24, 2018

9 a.m.-Noon

Pond Road Field

Register by June 1 Fee: \$125

Register June 2 or later Fee: \$135



Space is limited! Register early!

Class size is limited. Registration is on a first-come first served basis as received in the Community Education office.

Late pick-up will result in a \$1.00 per minute fee payable immediately to the instructor.

REFUND POLICY: No refunds or credits. Check will be returned only if a class is cancelled.

Please know that it is the policy of the Harvard Public Schools not to discriminate on the basis of race, color, sex, gender identity, religion, national origin, age, disability, or sexual orientation in its educational programs, activities or employment policies as required by Title IX of the 1972 Educational Amendments, Chapter 199, and Section 504 of the Rehabilitation Act of 1973. The district compliance coordinator is Marie Harrington, Director of Pupil Services, 978-456-4143.

Harvard Community Education, 978-456-4118 jcavanaugh@psharvard.org

SPECTRUM REGISTRATION FORM - Soccer Grades 1-6 (Fall 2018)

Use this form or register online at www.psharvard.org

Departments, Community Education Spectrum Summer

Name _____ Gr Fall 2018 _____

Allergies _____

Address _____

Home Phone _____ e-mail _____

Parent Name _____

Parent Work Phone _____ Cell # _____

Emergency Contact & phone _____
(Other than parent, in case parent cannot be reached)

Physician/Phone _____

Health Plan & Number _____

Checks should be made payable to TOWN OF HARVARD/SPECTRUM.

*Non Residents (does not include School Choice) please add \$10 non-resident fee.

	Tuition Register On or before June 1	Tuition Register On or After June 2
August 20-24, 2018	\$125	\$135

I, the undersigned, attest I am the parent or legal guardian of the above named child who attends the Community Education/SPECTRUM program and agree to allow him/her to participate in the above listed SPECTRUM class. I further agree to indemnify and hold harmless the staff, administrators, and official assistants and to absolve them from any and all liability arising from my child's participation in this activity.

I have read and am fully aware of the policies (ie. late pick up, refunds etc.) of Harvard Community Education and the SPECTRUM Program.

PARENT/GUARDIAN SIGNATURE

DATE

Harvard Community Education, 39 Massachusetts Ave., Harvard, MA 01451
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