

# No Limits Spring 2010 Outdoor Soccer Training

Child's Name \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Age \_\_\_\_\_  
Address \_\_\_\_\_  
Parents Name and cell phone \_\_\_\_\_ ( ) \_\_\_\_\_-\_\_\_\_\_  
\_\_\_\_\_ ( ) \_\_\_\_\_-\_\_\_\_\_  
Email \_\_\_\_\_

Session fees are as follows:  
One day a week \$150  
Two days a week \$250  
Three days a week \$350  
Payment plans may be negotiated with Mike Mural.

Monday 5:00 to 6:30 \_\_\_\_\_ 6:30 to 8:00 \_\_\_\_\_  
Wednesday 5:00 to 6:30 \_\_\_\_\_ 6:30 to 8:00 \_\_\_\_\_  
Thursday 5:00 to 6:30 \_\_\_\_\_ 6:30 to 8:00 \_\_\_\_\_

Please mail this form to the address below or email it to [side\\_volley@hotmail.com](mailto:side_volley@hotmail.com) and mail your check made to No Limits Soccer or cash (no credit cards) to:

No Limits Soccer  
P.O. Box 37  
Brookfield, IL.  
60513

Upon receipt you will receive a confirmation email to the address supplied.