

**SACRAMENTO YOUTH SOCCER LEAGUE
2006 Goalkeeping Clinic Registration Form**

Coaching Clinics (Tentative Dates)

Date Host	Club
August 25 & 26	Greenhaven

(DETACH)

Steve Martinez, Coaching Coordinator
Sacramento Youth Soccer League
3430 47th Avenue
Sacramento, CA 95824

To register for a clinic, **ALL 3 ITEMS MUST BE COMPLETED:**

1. Please send a \$25 check (payable to SYSL),
2. Include *a stamped, self-addressed envelope*, and
3. Include the bottom half of this form to the above address.

(Course runs Friday evening & Saturday morning)

Name: _____

Address: _____ City: _____

State: _____ Zip Code: _____ E-mail _____

Phone: (Day) _____ (Evening) _____

Club: _____

Clinic Requested: _____ Date: _____

Approved: _____ (SYSL Coaching Coordinator)

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.