

**COMMUNITY EDUCATION AFTER SCHOOL ACTIVITY PROGRAM**  
**&**  
**WYSA**  
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# Foundations Soccer Academy

## Winter Soccer Program 2009



*Come join our winter program! The only winter soccer program in Winona! Each player will learn from great coaches, and play actual games in every session.*



<u>Winter session dates:</u>	
January 17 <sup>th</sup> 8:30-10:30am	February 21 <sup>st</sup> 8:30-10:30am
January 24 <sup>th</sup> 8:30-10:30am	March 7 <sup>th</sup> 8:30-10:30am
February 7 <sup>th</sup> 8:30-10:30am	March 14 <sup>th</sup> 8:30-10:30am
February 14 <sup>th</sup> 8:30-10:30am	March 21 <sup>st</sup> 8:30-10:30am

**Coaches:**

**Eric Zimmerman, B.S.**

- Head Women's Coach Saint Mary's University
- CRUSA Youth Coach
- Former Viterbo University Men's Coach
- NSCAA & USSF licenses

**Chris Dembiec, B.A.**

- Head Men's Coach Saint Mary's University
- 2004, 2005 Wisconsin Coach of the Year
- 2004 Midwest Coach of the Year
- Two State Championships
- USSF, NSCAA, KNVB Licenses

**Location:** Winona Middle School Gymnasium

**What to bring to camp:** Players are required to bring a soccer ball, shin guards, tennis/indoor soccer shoes, and water bottle.

**\*Registration is open to all in Kindergarten-8<sup>th</sup> grade (ages 5-14)**

**Contact:** Chris Dembiec 608-397-1084 [cdembiec@smumn.edu](mailto:cdembiec@smumn.edu) or Eric Zimmerman 608-317-9716 [ezimmerm@smumn.edu](mailto:ezimmerm@smumn.edu)

**FSA Fees:** \$95 – for all sessions OR \$15/session

**Registration and fees made out and sent to:**

Foundations Soccer Academy  
 452 E. Sanborn  
 Winona, MN 55987

**Registration** ----- (tear here)

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Age \_\_\_\_\_ M/F \_\_\_\_\_ T-shirt Size – Adult or Youth S M L XL

Address \_\_\_\_\_

Primary Phone \_\_\_\_\_ Email \_\_\_\_\_

**WAIVER** - I, the undersigned, individually and as parent(s) and guardian(s) of the player named above, a minor, ask that he/she be admitted to participate in the Foundations Soccer Academy (FSA). In consideration of such admission, I do hereby agree to release discharge, and hold harmless, FSA, its officers, agents, and employees of and from all causes, liabilities, damages, claims, or demands whatsoever on account of injury, accident, or death involving the said minor arising out of the minor attendance at FSA in the course of competition and/or activities held in connection with FSA..

Parent/Guardian name (PRINT) \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_