



Memorial Indoor Soccer Academy Registration

Our monthly membership programs consist of year-round weekly classes for children ages 3-14 focusing on soccer techniques. All skill levels are welcome and we divide classes by age and skill. Our licensed coaches bring experience, passion, and fun activities to our fields.

Info@memorialindoor.com or **713-929-3577** to register.

Tuition (per Month)

-1 SESSION PER WEEK: **\$80 MONTHLY**

-2 SESSIONS PER WEEK: **\$140 MONTHLY**

**One-time registration fee of \$30 per child*

**Each additional sibling will receive \$20 off of their tuition.*

**(A) - Advanced classes: (P) – Parent involved (WL)- Waitlist*

Classes Offered: Please *'Circle'* the training session(s) desired

Child's Birth Year	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
B/G 2017					2:40-3:30 (WL)	2:00-3:00 (WL)	
B/G 2016		3:45-4:45		4:45-5:45	3:40-4:30	1:00-2:00	
B/G 2015		3:45-4:45		4:45-5:45	3:40-4:30	1:00-2:00	
B/G 2014			4:30-5:30	3:45-4:45	4:30-5:30	12:00-1:00	11:00-12:00
B/G 2013		5:45-6:45 (A)	4:30-5:30	3:45-4:45	4:30-5:30	12:00-1:00	11:00-12:00
G 2011/2012		5:45-6:45				10:00-11:00	12:00-1:00
G 2010	3:30-4:30	4:45-5:45					
G 2008/2009				5:45-6:45			
G 2006/2007			6:30-7:30 (A)	5:45-6:45 or 6:45-7:45 (A)		4:00-5:00	
G 2004/2005			6:30-7:30 (A)			4:00-5:00	
B 2012	4:30-5:30 (A)	5:45-6:45				10:00-11:00	10:00-11:00 (A) or 12:00-1:00
B 2011	3:30-4:30	4:45-5:45	3:30-4:30		5:30-6:30 (A)	11:00-12:00 (A)	10:00-11:00 (A) or 12:00-1:00
B 2010	3:30-4:30	4:45-5:45	3:30-4:30		5:30-6:30 (A)	11:00-12:00 (A)	
B 2008/2009			6:30-7:30 (A)	5:45-6:45 or 6:45-7:45 (A)	6:30-7:30 (A)	3:00-4:00	
B 2007-2004			6:30-7:30	6:45-7:45		4:00-5:00	

Childs Name: _____ Date of Birth: _____

Parents Name: _____ Parents contact #: _____

Email address: _____ Emergency contact #: _____

By signing below, you are acknowledging that payment will be **automatically deducted on a monthly basis, on starting date. **Please see email receipt for cancellation policies. You must notify in writing to cancel to info@memorialindoor.com.***

Signature of Parent/Guardian: _____ Date: _____

For OFFICE USE: Staff member _____

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