



# YLS for FC Dynamo ROC

[www.FCDynamoROC.com](http://www.FCDynamoROC.com)

## U6-U7 Little Legends Academy

The Athletic Campus – 3195 Brighton Henrietta Town Line Road



Have fun and improve your game at the YLS Little Legends Training. Learn the game from coaches that are former professionals and college players. Experience the joy of playing soccer using soccer related games and development appropriate soccer activities. While they are having fun with the planned activities, the young players will learn the skills needed at an older age.

**Save \$100!!!**

**Sign up for all three sessions and pay only \$260 for all three sessions**

**AND**

**Receive 50% off these YLS clinics throughout the indoor season – a \$75 value!!!**

Little Legends Thanksgiving Clinic  
Little Legends Holiday Clinic  
Little Legends February Clinic  
Little Legends April Break Clinic

**OR**

**Pay per session**

### Session 1

**Saturdays**

**November 7, 14, 21, 28 December 5, 12, 19**

**Time: 11:30 – 12:45pm**

**Cost: \$95**

### Session 2

**Saturdays**

**January 9, 16, 23, 30 February 6, 13, 27**

**Time: 11:30 – 12:45pm**

**Cost: \$95**

### Session 3

**Saturdays**

**March 6, 13, 20 April 3, 10, 17, 24**

**Time: 11:30 – 12:45pm**

**Cost: \$95**

**Questions and Comments: [admin@fcdynamoroc.com](mailto:admin@fcdynamoroc.com)**

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**YLS Legends for FC DYNAMO ROC Registration Form:** Register online at [www.FCDynamoROC.com](http://www.FCDynamoROC.com) or mail registration form and check to FC Dynamo ROC, PO Box 1296, Webster, NY 14580. No refunds will be issued once a player is registered.

Name \_\_\_\_\_ E-mail \_\_\_\_\_  
Street \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
Phone # \_\_\_\_\_ DOB \_\_\_\_\_  
In case of emergency contact \_\_\_\_\_ at \_\_\_\_\_

**T-Shirt Size** Youth M L Adult S M L

**Waiver:** In case of an emergency requiring medical attention, I hereby authorize the staff of FC Dynamo ROC and the staff of YLS to act for me according to their best judgment. I hereby waive and release FC DR, YLS and their respective staff from any and all liability for any injury or affected illness incurred at the camp. I have no knowledge of any physical impairment that would endanger the above named player from participating in this clinic.

**Parent/Guardian  
Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

\_\_\_\_\_ 2020-2021 Little Legends Academy all 3 sessions  
\_\_\_\_\_ 2020-2021 Little Legends Academy Session 1  
\_\_\_\_\_ 2020-2021 Little Legends Academy Session 2  
\_\_\_\_\_ 2020-2021 Little Legends Academy Session 3