



# ASANTE SOCCER ACADEMY

PROMOTING EXCELLENCE WITHIN SOCCER, BUILDING RELATIONSHIPS,  
DEMONSTRATING EXCELLENCE IN LEADERSHIP AND POSITIVE ROLE MODELLING

## MARCH BREAK REGISTRATION

Register Before February 11, 2020 For The Early Bird Discount

Player's Last Name \_\_\_\_\_ First Name \_\_\_\_\_ mm dd yr  M  
 F

Address \_\_\_\_\_ Apt# \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Tel: ( ) \_\_\_\_\_ - \_\_\_\_\_ Bus Tel: ( ) \_\_\_\_\_ - \_\_\_\_\_

Email (print clearly): \_\_\_\_\_

Health Card # \_\_\_\_\_ Medical Conditions / Allergies (please specify) \_\_\_\_\_

### WAIVER

I hereby understand that the registration does not include medical insurance coverage. I agree to release and indemnify Asante Soccer Academy(ASA) and its affiliates from any claims arising from injuries incurred by the applicant while participating in the Asante Soccer Academy. I consent to the use of my photographs, and videos to Asante Soccer Academy. I acknowledge and agree that ASA reserves the sole and exclusive right to use any such photograph or videos for advertising and instructional purposes without cost or charge to ASA.

Parent / Guardian Name \_\_\_\_\_ Parent / Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

### FULL TIME FEES

1 Week (Mon - Fri) **Early Bird Special**  
(\$100.00)

1 Week (Mon - Fri) After February 11, 2020  
(\$150.00)

### PART-TIME FEES

Please select the individual days for which your child will be registered The daily Fee is \$35.00

M  T  W  Th  F

\_\_\_\_\_ (amount enclosed for part time fee)

### EMERGENCY CONTACT:

YES. I require Early Drop Off (8AM)

Name: \_\_\_\_\_

YES. I require Late Pick Up (5:30PM)

Phone: \_\_\_\_\_

YES. I require BOTH

Relationship: \_\_\_\_\_

### ASANTE SOCCER ACADEMY

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