



# Future Bulldog Soccer Clinic



Date: **Tuesday, October 16**  
 Time: **6:00 pm – 8:00 pm** (check-in 5:30-6:00)  
 Location: **FHS BARC** (NW corner of Bulldog Stadium)  
 Who: **Boys and Girls Grades K – 8<sup>th</sup>**  
 Cost: **\$20** (contact Coach Crenshaw for a team discount – [brent.crenshaw@g.fayar.net](mailto:brent.crenshaw@g.fayar.net))

**Let your son or daughter spend the evening with the Fayetteville High School Soccer Players and Coaches learning and practicing the fundamentals of soccer. Please have your child bring shin guards, soccer ball, and water. Cleats are recommended but not required. Drinks and snacks will be provided.**

Child's Name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_ Gender: M F  
 School: \_\_\_\_\_ Parent/Guardian Name: \_\_\_\_\_  
 Parent/Guardian Phone Number: \_\_\_\_\_

I give permission for \_\_\_\_\_ to participate in the FHS Bulldog Soccer Clinic. I understand that \_\_\_\_\_ is required to conform to the same behavior rules in school. I understand the risk of injury and hold harmless of blame Fayetteville High School and its employees, coaches, and players in the event of injury.

Parent/Guardian Signature: \_\_\_\_\_

Registration Options:

1. Mail form and payment to: FPS Athletic Office, Attn: Angela Phillips/Soccer clinic, 915 W. Clinton Ave., Fayetteville, AR 72701 (Make check payable to: FHS Soccer)
2. E-mail completed registration form to [scott.rainer@g.fayar.net](mailto:scott.rainer@g.fayar.net) (Pay at check-in on Oct. 16)
3. Register the day of the event at check-in.

**Proceeds benefit the Fayetteville High School Men's Soccer Team.**