North Davidson Winter Indoor Soccer

NOT the traditional Indoor Soccer, or is it? Our 8th year playing here in Davidson County, Futsal is organized by USFF and is the only international form of indoor soccer approved by FIFA.

Futsal is a sport that is a derivative of soccer and played with 5-man teams (6 for U12 & below) on a basketball court, with no walls and a low bouncing ball that puts the emphasis on ball control, unlike the traditional U.S. indoor soccer played with walls and bouncy ball. Great soccer superstars such as Ronaldinho, C. Ronaldo, and Thierry Henry grew up playing the game and credit Futsal with developing their skills.

League is TFF…Totally For Fun! No practices, no official standings. Just the opportunity to keep your foot on the ball and have a ton of fun! It is a fantastic way to work touches and speed of play during the off season!

The season will run from 1/10/10 – 2/21/10 and will be in gyms in the North Davidson area. Games will be on either Saturday evening or Sunday (mostly afternoons…possibly a rare morning).
Contact Greg Beall @ 476-4545 or visit www.ndindoorsoccer for more information.

NORTH DAVIDSON INDOOR SOCCER REGISTRATION

Registration is $50.00 and is due by November 25. Space is limited and will be filled on first-come basis. Teams wishing to play together should send in their registrations together and indicate such.

Name _____ **DOB** _____ **Gender** _____

Address _____ **Phone** _____

City _____ **State** _____ **Zip** _____

Email _____ **School** _____

Age Division

- ☐ U8 (6-7 yrs)
- ☐ U10 (8-9 yrs)
- ☐ U12 (10-11 yrs)
- ☐ U15 (12-14 yrs)
- ☐ U18 (15-17 yrs)

**Divisions may vary depending on numbers

Shirt Size: Y-SM Y-MD Y-LG A-SM A-MD A-LG A-XL

	Name	Home Phone	Work Phone
Mother:			
Father:			

WE UNDERSTAND THAT SOCCER IS A CONTACT SPORT AND INJURIES SOMETIMES HAPPEN. WE AGREE TO RELEASE, DISCHARGE, AND HOLD HARMLESS ALL PARTIES ASSOCIATED WITH THE ADMINISTRATION OF THIS LEAGUE FROM ALL CAUSES, LIABILITIES, DAMAGES, CLAIMS, OR DEMANDS, WHATSOEVER. FURTHER, WE GRANT PERMISSION TO LEAGUE OFFICIALS TO SEEK MEDICAL ATTENTION IF NEEDED.

Signature _____ **Date** _____

Make checks payable to North Davidson Indoor Soccer and mail to:
608 McGee Road, Winston-Salem, NC 27107.