



## SOUTH VALLEY CHIVAS ACADEMY

CHIVAS USA AND CHIVAS GUADALAJARA  
FUTBOL ACADEMY IN PORTERVILLE AND DELANO, CA.

### WILL HOST A SOCCER CLINIC WITH USC TROJAN WOMEN SOCCER HEAD COACH "2007 NCAA DIV I NATIONAL CHAMPIONS"

#### ALI KHOSROSHAIN

UNIVERSITY OF SOUTHERN CALIFORNIA WOMEN SOCCER HEAD COACH,  
2007 NATIONAL COACH OF THE YEAR AND WEST REGION COACH OF THE YEAR,  
MEMBER OF MEXICAN WOMEN NATIONAL TEAMS COACHING STAFF  
EX-CAL STATE FULLERTON COACH, USSF NATIONAL "A" LICENSE

ON  
MARCH 7-8, 2009  
RIVERWAY SPORTS PARK  
VISALIA, CA.

#### DAY 1: SATURDAY MARCH 7, 2009

1pm – 3pm Soccer Clinic  
3pm – 4pm Q&A Session (College soccer, recruiting, scholarships, etc)

#### DAY 2: SUNDAY MARCH 8, 2009

10am – 12pm Soccer Clinic

#### AGES

BOYS AND GIRLS AGES 9 - 18

#### LOCATION

RIVERWAY SPORTS PARK  
3611 N. DINUBA HWY  
VISALIA, CA.

#### COST

\$65.00

INCLUDES: BOTH DAY CLINICS  
(REGISTER BEFORE MARCH 2, 2009 AND RECEIVE A FREE SOCCER BALL)

FOR MORE INFORMATION VISIT: [WWW.CHIVASSOUTHVALLEY.COM](http://WWW.CHIVASSOUTHVALLEY.COM) OR EMAIL: CHIVASACADEMY@HOTMAIL.COM

## REGISTRATION FORM

CAMPER NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_  
BIRTHDATE: \_\_\_\_\_ AGE: \_\_\_\_\_  
TEAM NAME: \_\_\_\_\_ POSITION: \_\_\_\_\_ GRADE: \_\_\_\_\_  
PARENT NAME: \_\_\_\_\_  
EMAIL: \_\_\_\_\_  
PARENT PHONE: \_\_\_\_\_

## RELEASE AND INDEMNITY AGREEMENT

The undersigned player or parent and/or lawful guardian of the above player or named minor hereby releases South Valley Chivas Academy, and their subsidiaries, agents, team managers, and assistant managers, coaches, team parents, sponsors, officers, directors, employees, and all other parties of interest from all claims and causes of action, including but not limited to all damages of any kind which may arise from or out of the above named minor's participation in soccer clinic. This release of liability and indemnification agreement includes release from any injury arising from any act of omission that may arise from or during the clinic or any events or any injury or damage arising from any related activity associated with the clinic.

Should any claim be made or any lawsuit be filed on account of any injury or damage to the above player or minor named or entry described above arising from any act of omission referred to or related to the clinic, the above undersigned will indemnify and hold harmless the South Valley Chivas Academy for any and all amounts incurred by the tryouts for damages, whether by settlement or judgment as well as any amounts incurred by the South Valley Chivas Academy for defending against any such claim or judgment, including all attorney's fees and costs incurred.

\_\_\_\_\_ / \_\_\_\_ / \_\_\_\_

SIGNATURE OF PARENT/GUARDIAN

DATE

## HOW TO REGISTER

#### BY MAIL (SEND APPLICATION & CHECK):

SOUTH VALLEY CHIVAS ACADEMY  
1430 W WESTFIELD AVE  
PORTERVILLE, CA. 93257

#### ONLINE:

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

PAY FEES WITH CREDIT CARD (PAYPAL)