

MSA INDOOR WINTER SPORTS FOR POTOMAC ES



Montgomery Sports Association (MSA) is Offering Fantastic Programs that Improves your child Skills in their Favorite Sports While Having Fun.

All Programs are Skill Based. Children Become Confident in the Sport they love by learning Skills.

All Coaches are Adults, Professional, Kid-Friendly and had background checks. Participants Will Receive T-Shirts.

For Children 4 - 12 Years (the age groups will be divided by skill and age)
MSA IS VOTED #1 BEST COACHING STAFF AND PROGRAM & CAMPS THROUGHOUT THE COUNTY FOR THE PAST 25 YRS.!!!

CHECK OUR NEW WEBSITE FOR OTHER LOCATIONS AND SPORTS

www.montgomerysports.org

301-983-2227

INDOOR BASKETBALL

1. POTOMAC ES, Tuesdays, 3:50-5:15PM

(a) 12/14-2/22, \$160 or
(b) 2/29-4/5, \$140

2. CABIN JOHN MS, Saturdays, 12-1PM, (a) 12/18-2/5, \$120 or (b) 2/12-3/26, \$160

3. CABIN JOHN MS, Sundays, 12-1PM, (b) 2/13-3/27, \$160

INDOOR SOCCER

4. POTOMAC ES, Fridays, 3:50-5:15PM, (a) 12/17-2/18, \$160(8 weeks) or (b) 2/25-4/8, \$120 (6 weeks)

5. CABIN JOHN MS, Saturdays, 1-2PM, (a) 12/18-2 \$160.00/5, \$140 or (b) 2/12-3/26,

6. CABIN JOHN MS, Sundays, 1-2 PM, (a) 12/19-2/6, \$140 or (b) 2/13-3/27, \$160.00

INDOOR FLAG FOOTBALL

7. The Mclean School, Potomac, Saturdays, 1-2 PM, (a) 12/18-2/5, \$140 or b) 2/12-3/26: \$160

8. The Mclean School, Sundays, 1-2 PM, (a) 12/19-2/6, \$140 or (b) 2/13-3/27: \$160

INDOOR TENNIS

9. POTOMAC ES, Thursdays, 3:50-5:15PM, (a) 1/6-2/24, \$190 (8 weeks) or (b) 3/3-4/7, \$145 (6 weeks)



INDOOR STREET HOCKEY

10. THE MCLEAN SCHOOL, Potomac, Saturdays: 2-3PM: (a) 12/18-2/5, \$140 or (b) 2/12-3/26: \$160.00

INDOOR TENNIS

11. CABIN JOHN MS, Saturdays, 2-3PM, (a) 12/18-2/5, \$120 or 2/12-3/24, \$190
12. CABIN JOHN MS, Sundays, 11-12PM, (a) 12/19-2/6, \$140 or (b) 2/13-3/27, \$190

DANCE

BALTIMORE RAVENS CHEERLEADER!!!
13. POTOMAC ES, Wednesdays, 3:50-5:15PM, (a) 12/16-2/9, \$160 or (b) 2/18-4/6, \$140



WE ACCEPT ONLINE PAYMENTS AT WWW.MONTGOMERYSPORTS.ORG OR PHONE REGISTRATIONS, 301-983-2227

Parental Consent/Registration

My child is covered by medical insurance and any special medical conditions will be stated. The Organizers and their representatives are not responsible for any injury or damage that may occur. I authorize session staff to act on my behalf in emergency. I agree to MSA No refund policy, that states only a credit will be issued for future MSA Activities. PRINT PARENT/GUARDIAN NAME HERE: _____

Parent Signature: _____

Address: _____

Child Health: _____

POTOMAC ES _____

Name: _____

Age: _____ M/F: _____ Phone: _____

Email: _____ Cell: _____

Credit Card #: _____ ZIP CODE: _____

Exp. Date: _____ Amount paid: \$ _____