



# OPEN TRYOUTS FOR 2021/2022 SEASON

Chicago Inter Soccer has become a premier Girls and Boys club in South West Chicago land, with teams playing at the highest levels of competition in Illinois. Our boys and girls participate in both local and national level college showcase tournaments, Midwest Regional League. We have proven methods that will develop young players soccer skills while still having fun! We make it our highest priority to get exposure for our older players to college coaches and universities. Our training staff is made up of Pro and Semi Pro European players, who care about kids and the advancement of the game in the United States.

## BOYS & GIRLS TRYOUTS SCHEDULE

### HS GIRLS U15 – U19 BORN: 2003 - 2007

**MAY 1<sup>st</sup> - 6:30 pm to 8:00 pm**

**MAY 2<sup>nd</sup> - 6:30 pm to 8:00 pm**

**Location: Chicago Inter Complex**

**15711 S Briggs Rd, Lockport IL 60441**

### BOYS BORN: 2007 - 2016

**MAY 4<sup>th</sup> & 5<sup>th</sup> - 6:00 pm to 7:30 pm**

**HS BOYS U15 – 19 BORN 2003 - 2006**

**MAY 5<sup>th</sup> & 12<sup>th</sup> - 6:00pm to 7:30 pm**

**Location: Chicago Inter Complex**

**15711 S Briggs Rd, Lockport IL 60441**

### GIRLS BORN: 2008 - 2016

**MAY 15<sup>th</sup> - 6:30 pm to 8:00 pm**

**MAY 16<sup>th</sup> - 6:30 pm to 8:00 pm**

**Location: Chicago Inter Complex**

**15711 S Briggs Rd, Lockport IL 60441**

### Player/Parent Commitment Agreement:

I wish to participate with Chicago Inter Soccer Club on a competitive travel soccer team and I am willing to commit to a practice and games schedules, each in the fall, winter and spring season. If selected to a team, registration fees for are non- refundable. Players are selected by the club coaches based on their demonstrated skill, stamina and competitive spirit. No refunds will be made after team placement occurs.

### Statement of Liability and Understanding:

I hereby authorize the staff of the Chicago Inter Soccer Club, their agents or counselors to act for me according to their best judgment in any emergency requiring medical treatment and hold harmless the coaching staff of any and all liabilities, injuries or illness incurred while at open training/tryout sessions.

Parent Signature: \_\_\_\_\_

Player Signature: \_\_\_\_\_

Date: \_ \_

### TRYOUT REGISTRATION FORM

Players First Name: \_\_\_\_\_

Players Last Name: \_\_\_\_\_

DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ School Grade: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Fathers Name: \_\_\_\_\_ Cell #: \_\_\_\_\_ Email: \_\_\_\_\_

Mothers Name: \_\_\_\_\_ Cell #: \_\_\_\_\_ Email: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Work #: \_\_\_\_\_

**For any additional information's please visit our website**

**<http://www.chicagointersoccer.com>**

**email us at: [info@chicagointersoccer.com](mailto:info@chicagointersoccer.com) or call 630.890.6998**