



# PRO-SKILL SOCCER



## OCTOBER HALF TERM COURSE & GK COURSE

**COURSE 1. DATES :** Monday 26<sup>th</sup> – Friday 30<sup>th</sup> October (5 Days) **COST: £60.**  
(1 Day £15) **AGES: 4 – 12 YRS.** **TIMES: 9.30am – 3.15pm.**

**COURSE 2. DATES:** Monday 26<sup>th</sup> – Wednesday 28<sup>th</sup> October. (3 Days)  
**COST: £50 (1 Day £20)** **AGES: 8 – 16 YRS.** **TIMES: 10am – 2.30pm.**

**VENUE: Gresford Memorial Hall. ( BOTH COURSES).**

The GK course will be run by Mike Price, who has played professionally for Aston Villa and has trained with the likes of ex England Goalkeeper David James.

Why not join the North West's leading soccer school for an action packed soccer course. The course caters for Boys and Girls, whether your child is a beginner or star of the future, our programme is a great way of having fun, learning new skills and making new friends in a safe secure environment. All Pro-Skill Soccer coaching staff are fully qualified, insured and DBS cleared. For more details visit:

[www.proskillsoccer.co.uk](http://www.proskillsoccer.co.uk)

To book your place simply fill in the slip below and send with payment of £\_\_ to **Pro Skill Soccer, 36 Pant Olwen, Gresford, Wrexham, LL12 8ES.** Cheques should be made payable to: **Pro-Skill Soccer.** **There will be a £10 discount for siblings.**

**PLEASE NOTE:** Limited spaces are available for these courses due to Covid 19. Please make sure to send your slip with payment to reserve your child's place ASAP.

- ❖ All children will need to bring a packed lunch and drinks for the day. **All children will also need suitable clothing and footwear for Indoor & Outdoor football.**

**AS A COMPANY WE ADHERE TO ALL THE GUIDELINES IN PLACE AND THE MEASURES ARE PUT IN PLACE TO MAKE THE COURSE SAFE FOR ALL THE PLAYERS.**

**HOTLINE: 07732648043**

-----  
Name: \_\_\_\_\_ Age: \_\_\_\_\_ Chosen Course ( 1 or 2 ) \_\_\_\_\_

Address: \_\_\_\_\_ Post Code: \_\_\_\_\_

Contact Number: \_\_\_\_\_ School: \_\_\_\_\_

Parent Name: \_\_\_\_\_ Sign: \_\_\_\_\_

Email Address: \_\_\_\_\_ Total Cost \_\_\_\_\_

Any medical requirements should accompany this form in writing.