

Narragansett United is a regional premier youth soccer club serving players from Cumberland and York counties in south-western Maine. Our club offers teams and programs for players to train on a premier and developmental level. Our coaching staff comes from an array of backgrounds with youth, high school and college coaching experience. Our coaches are licensed by the United States Soccer Federation or certified by the National Soccer Coaches Association of America.

Narragansett United sees player development as a succession of phases with each phase becoming more finite as the players role becomes more distinct. Our objective is for players to train and compete within the parameters of a specific program. Training and competition is age appropriate with a particular focus on the player's ability with a ball and their decision making.

By signing this application I understand that neither Narragansett United, Your Space its agents or employees will assume any responsibility for accidents and medical or dental expenses incurred as a result of participation in this clinic. I understand that there are inherent risks and dangers in participating in these types of programs and I accept the responsibility to provide accident insurance for my child including ambulance transportation if necessary. Further I expressly release and hold harmless Narragansett United, Your Space, its agents and employees from and against any and all claims, suits, actions and damages arising out of, connected with, or resulting from my child's participation in the Goal keeper Clinic. I understand and give permission to Narragansett United and Your Space to take pictures of or use the likeness of program participants that may appear in future promotional materials.

X \_\_\_\_\_  
(Parent/Guardian signature)



**Narragansett United's  
Goalkeeper Clinic**

**Your Space Rte. 202 Gorham  
(215 Narragansett Trail)**

**Monday February 15**

**8:30a-11:30a**

**U9-14 year olds**

Girls and boys recreational and travel players  
are encouraged to participate  
[www.narragansettunited.org](http://www.narragansettunited.org)

All training activities are age appropriate. Our training staff is concentrated with coaches who have exceptional experience working with youth soccer players.

Registration fee is \$55 per player. All players will receive a clinic t-shirt and a copy of the training exercises presented

Lead Clinicians:

**Alan Curtis**

Narragansett United Programs/Coaching Director  
Bonny Eagle HS Boys head coach  
Former University of New England women's assistant  
Former University of Southern Maine men's assistant  
Former Southern Maine Technical College Head Coach  
USSF C License

**Joel Costigan**

Narragansett United goal keeper coach  
Bonny Eagle HS Boys assistant coach  
Former Westbrook HS Boys goal keeper coach  
USSF E License

Other staff members will include area coaches and standout players from high school and college

Athletic Trainer

**Erica Baptiste**

MA, ACT, LAT



Training topics will include:

Catching – Falling – Distribution –  
Footwork – Strength and Conditioning

Players will be divided into three groups:

U9-10                  U11-12                  U13-14

**Catching** – ground and air balls  
Hand placement and body shape

**Falling** – to the sides and forward

**Distribution** – feet and hands  
Punting – drop kicking  
Ground balls – restarts and run of play  
Throwing – distance and bowling

**Footwork** – speed and agility  
Covering angles in the box

**Strength and conditioning** -  
Exercises for core and leg strength



Register by mail - send this form to  
Narragansett United – Goal Keeper Clinic  
PO Box 734 – Gorham, Maine 04038

Player Name \_\_\_\_\_

D.O.B \_\_\_\_\_ Age \_\_\_\_\_ Male Female

Shirt size (circle one) AS AM AL

Mother's name \_\_\_\_\_

Father's Name \_\_\_\_\_

Home Address/Mailing Address

\_\_\_\_\_

Home Telephone \_\_\_\_\_

Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Any medical conditions, medications or behaviors we should know about ?

\_\_\_\_\_

Contact if parent(s) cannot be reached

\_\_\_\_\_

Relationship \_\_\_\_\_

Home Telephone \_\_\_\_\_

Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

On the back side of this form, please read our participation waiver statement and sign.