



Florida Youth Soccer and Leg-A-Z Soccer Present E License Coaching Course

Thousands of coaches have attended and successfully completed U.S. Soccer Federation coaching course since they were first developed in 1971. These coaching education programs provide all coaches from the beginner to the most advanced with up-to-date theoretical and practical knowledge.

The "E" is designed for the parent/coach who may or may not have any previous soccer playing or coaching experience. The curriculum focuses on the development of the player, both individually and as part of the team. The emphasis will be to build on the player's technical development by applying tactical concepts within game situations. The course should assist you in learning more about the game and the best way to coach youth players.

You will learn taught the proper techniques of soccer, the progression for teaching technique, how to recognize and correct technical breakdowns, the principles of attack and defense, care and prevention of injuries, and strategies for team management.

DATE / TIME: Oct 20-22, 2006; 6-9pm Friday; 9am - 5pm Saturday; 9am - 2pm Sunday.
(You must attend the full 18 hrs to receive credit for the course)

WHERE: Martin Luther King Center, 1028 NE 14th St., Gainesville, FL 32601

COST: \$70. Please make check payable to Leg-A-Z Soccer Academy.

CONTACT: Basil Benjamin, technical director, Leg-A-Z Soccer Club, (352) 377-6088;
khunum@legazsoccer.com

APPLY: **Pre-registration required.** Materials will be available only to those on course roster. Detach application below and send to: LSA, PO Box 141656 Gainesville FL 32614; or email the course contact to reserve a spot.

DIRECTIONS: The MLK Center is located in east Gainesville, just off Waldo Road behind the Citizens Field football field.

EQUIPMENT: Cleats, shin guards, shorts and T-shirt, change of clothes, properly inflated No. 5 soccer ball, pen and pad, water, rain gear if needed.

MORE INFO: www.legazsoccer.com



Leg-A-Z Soccer E License Pre-registration (Please print legibly)

Name: _____

Street Address: _____ City _____ Zip _____

Daytime Phone: () _____ Evening Phone: () _____

e-mail: _____ Check #: _____

Mail to: LSA, PO Box 141656 Gainesville FL 32614.