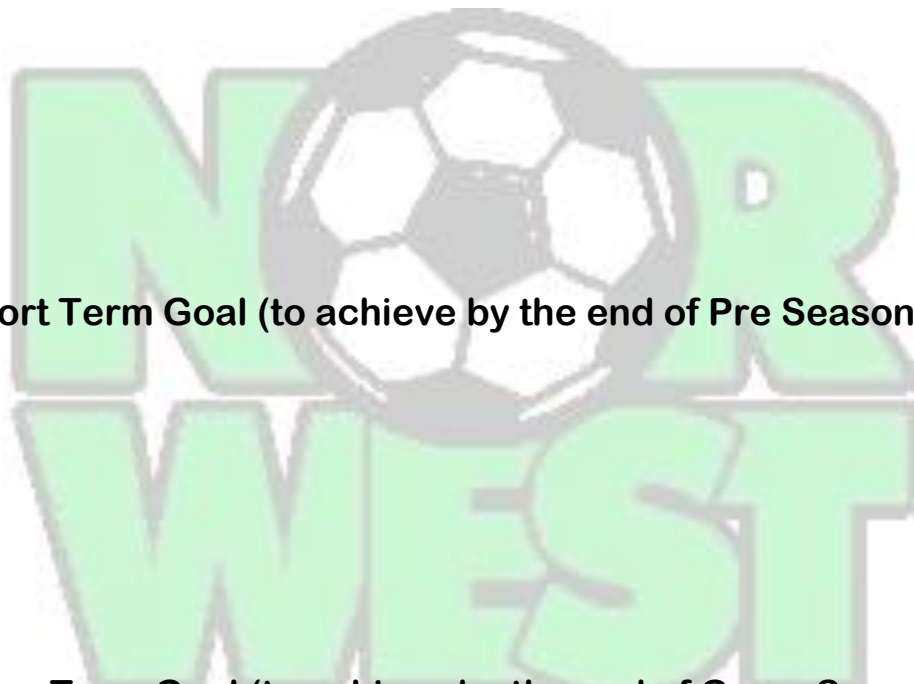


NAME: _____

DATE: _____

What do I do well on the soccer field?

What soccer skills would I like to have or to improve on?



What is my Short Term Goal (to achieve by the end of Pre Season)?

What is my Long Term Goal (to achieve by the end of Game Season)?

What do I like about being a member of this team?

Reviewed with Coach _____