

John Jay Soccer Camp

2018

When: Monday August 20th to Wednesday August 22nd

Where: John Jay High School Soccer Field

Time: 6 – 7:30pm

Cost: \$50 Please make **checks** out to: **John Jay Soccer**

Ages: 10 years old, 11 years old, and 12 years old

Camp will teach the youngsters the fundamentals of the game. There will be a great coach to player ratio (1 to 1), so you child will get plenty of individual instruction that is needed at this young age.

Visit us on the web at www.johnjaysoccer.com for any updates or cancellations

Please bring water, sunscreen, shin guards, and a soccer ball (if you have one ~ if not, we will have plenty of extra soccer balls available)

(Tear off and send in the registration form with a check)

Registration Form

Please print, fill out, and mail to:

**John Jay Soccer
c/o Robert Seipp
67 Seaman Road
Stormville, NY 12582**

Last Name _____ First Name _____ Age _____

Parent's Mailing Address: _____

Cell/Home Phone # _____ **we will only use this # in case of an emergency**

Parental Consent

I give permission for (list names of children participating in the camp) _____ to participate in the John Jay Soccer Camp. As the parent or legal guardian of the above-named player(s), I hereby give my consent for emergency medical care prescribed by a duly licensed Doctor of Medicine or Doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve the life, limb, or well-being of my dependent(s). I am aware that soccer is a contact sport and my child (or children) may be subject to injury. I will not hold the John Jay Soccer Camp Staff or the Wappingers Central School District liable for any injuries that may occur during camp. I also understand that portions of the camp may be interrupted by inclement weather.

Parent Signature _____

Date _____