# **Rivals United Pre-Season Soccer Camp**

## **APPLICATION FORM**

This application is for one player. Please complete in full and mail to address provided below.

#### PLAYER AND PARENT INFORMATION

Address: City:	State:	Zip:	
E-Mail: Address:			
Parent/Guardian:			
DOB&team:		·	
Player Name:			

#### **CAMP DETAILS**

Name of Club or hosting organization: Blue Wave Kickers

Date of Camp: Sun Aug 25- Wed 28

**Session time: 1:45 – 3:30 pm** 

Price: \$165 (payable to Blue Wave Kickers)

### **Parental Consent**

As parent/guardian of the above player, I certify that he /she is in excellent health and has no physical, mental, or emotional problems which are likely to prevent participation in strenuous physical play at soccer camp. I agree to hold harmless Blue Wave Kickers and its agents and employees and hereby release them from any liability on account of injury sustained during such participation and certify that he/she is covered by medical insurance which will reimburse Blue Wave Kickers for expenses incurred by them, their agents and employees on account of medical insurance ordered at their discretion and also to indemnify them for any expenses not reimbursed by such insurance.

Date:

We are proud to announce our 1<sup>st</sup> Rivals United Preseason Camp. This promises to serve as an aid to prepare for the upcoming fall soccer season. This camp will be the perfect precursor to the fall season.

We look forward to providing you with a fun, yet intense, week of training. All players are encouraged to attend.

Camp will focus on the following:

Individual ball skills and first touch; Small and full sided games; Shooting & finishing; Teamwork; & of course......Fitness & agility.

## **Blue Wave Kickers**

**Presents** 

1<sup>st</sup> Rivals United Preseason Soccer Camp Aug 25 to 28 2019 at Middlesex Upper

**Cost: \$165** 

Checks made payable to: Blue Wave Kickers
Mail Registrations to:
Blue Wave Kickers
112 Prudence Dr
Stamford, CT. 06907