



2nd Annual Summer Soccer Camp ThunderRidge High School

When: June 4-7, 2012 9:00am to 12:00pm

Where: ThunderRidge High School soccer fields

Who: Incoming 3rd-8th Grades Boys and 3rd-9th Grade Girls

Cost: \$100.00

Campers will work on shooting and finishing, soccer fundamentals, soccer moves, passing and receiving, transition and movement of the ball, defensive play, attack play, possession, crossing and finishing, dribbling and touches on the ball. The tentative schedule is below with two of the above topics being introduced daily:

8:30-9:00am: Coach Set-Up and Player Arrival

9:00-9:30am: Fitness Warm-Up

9:30-9:35am: Break into Groups

9:40-10:45am: Session 1

10:45-10:55am: Break

10:55am-Noon: Session 2

Send completed form along with a check made payable to:

GBBC Boys Soccer

ThunderRidge High School Athletics

Attn: Chris Smith

1991 Wildcat Reserve Parkway

Highlands Ranch, CO 80129

Please register by: June 1, 2012

You may also register on the first day of camp by 8:30

2nd Annual Summer Soccer Camp

Please print. Do not include more than one participant per registration form.

Player's Name _____ Grade/Age _____
Parent's/Guardian's Names _____
Address _____
Street _____ City _____ Zip Code _____
Home Phone _____ Work/Cell Phone _____
(please circle)

School Student Now Attends _____

Emergency Information: If we cannot contact parents, call:

Name _____ Phone _____

Relationship _____

Family Doctor _____ Phone _____

I/we (print parent/guardian names) _____ in return for my child's opportunity to participate in the 2012 2nd Annual TRHS Soccer Camp do hereby exempt and release the Douglas County School District, its directors, officers, employees, volunteers, and agents from any and all liability, claims, demands, or actions whatsoever arising out of any damage, loss, or injury that my child or I/we might sustain while my child is participating in the 2012 2nd Annual TRHS Soccer Camp, whether or not such damage, loss, or injury results from the negligence of Douglas County School District, its directors, officers, employees, volunteers, or agents or any defective equipment. I/we understand that if I/we do not sign this release, then my child will not be permitted to participate in the 2012 2nd Annual TRHS Soccer Camp. I/we hereby represent that I am/we are 18 years of age or older and that I am/we are the parent(s)/guardian(s) of (insert child's name here) _____. I/we further acknowledge that no representation or promises by Douglas County School District representatives have been made to induce me to sign this release.

X _____
Signature of Student

_____ Date

X _____
Signature of Parent

_____ Date

CAMP ACTIVITIES INSURANCE WAIVER

I fully understand the Douglas County School District RE. 1 does not provide health or life insurance coverage for the above named student while he/she is participating in camp activities. I/We further understand that it is my/our responsibility to provide adequate insurance coverage to the above named student.

X _____
Signature of Parent or Guardian

_____ Date

Camp Title	Date/Time of Camp	Cost of Camp
2012 2 nd Annual Summer Camp	June 4-7, 2012 9:00am-12:00pm	\$100.00

T-Shirt Size (Adult S, M, L, XL) _____

Please make checks payable to GBBC Boys Soccer. Your processed check will be your receipt. All returned checks will be assessed a \$20.00 charge.