

2019 YOUTH SOCCER CAMP

CAMP RUNS JUNE 24TH THRU JUNE 27TH, 2019

CAMP IS FOR ALL AREA BOYS & GIRLS ENTERING GRADES K THRU 5! SOCCER CAMP WILL BE AT LOS ARBOLES MIDDLE SCHOOL LOWER FIELD 294 HILLCREST AVENUE, MARINA 93933 **MONDAY THRU THURSDAY.**

COACH RON AND MARINA RECREATION & CULTURAL SERVICES STAFF WILL CONDUCT THE CAMP. THE CAMPS FOCUS WILL BE ON MOTOR ABILITY, BALANCE, AGILITY, COORDINATION, PERCEPTION AND AWARENESS.

- - *Clip and return to Marina Recreation (211 Hillcrest Avenue, Marina 93933)* - -

OFFICIAL PLAYER APPLICATION

- - - PLEASE PRINT ALL INFORMATION - - -

CHECK

- BOY
- GIRL

GRADE ENTERING

- K 1ST 2ND
- 3RD 4TH 5TH



Name of Player: _____

School: _____

Home Address: _____ City: _____

Phone #1: _____ Email: _____

Parent Information (work & cell #): _____

*Any restrictions or health concerns staff should be aware of: _____

PARENTS Please Complete Agreement to Participate on Back

2019 MARINA YOUTH SOCCER CAMP

League Hotline: (831) 884-1254

FORMAT: Camp for K-2 grades will be Monday thru Friday 9:00 a.m. to 12:00 p.m. and 3-5 grades 1:00 to 4:00 p.m.

DEADLINE: All participant applications must be received at Marina Recreation no later than 5:00 pm, Friday, June 21th, to reserve a spot in the soccer camp! Late entries will be put on a waiting list. Please turn in the form below, with all information completed on both sides!

FEES: \$20.00 for Members, \$40.00 fir Non-Members, \$55.00 for Non-Members/Non-Residents – 50% off all children in the same family after child 1.

- - *Clip and return to Marina Recreation (211 Hillcrest Avenue, Marina 93933)* - -

----- **AGREEMENT TO PARTICIPATE** -----

As Parent or Guardian of the Minor Child named on this Application, and in consideration of being permitted to enroll my minor child in this event, I acknowledge the following: that participation in this event is voluntary, and involves physical activity. I agree as to myself and for my heirs, personal representatives or assigns, to hereby assume the risk of any injury from any cause whatsoever, including the negligence of the City; and to give up, waiver, and discharge and release the City of Marina, the Corporate Sponsors of this program, their officers, volunteers, agents, and employees, from any and all claims for injuries, including death, which my minor child could sustain, and I agree to hold the City harmless, and covenant not to sue the City or others listed herein, should property loss, injury, or death occur during or as a result of my minor child's participation in this program. If necessary, the City may provide medical care for my minor child at my expense. By signing below, I acknowledge that I have read this assumption of risk, waiver and release of liability agreement, fully understand its terms, and I understand that I am giving up substantial rights, including my right to sue. I acknowledge that I am signing this agreement freely and voluntarily, and intend by my signature for this to be a complete and unconditional release of all liability to the greatest extent of the law.

Child's Full Name: _____ Age: _____

Address: _____ School: _____

Parent(s) Printed Name: _____

Parent(s) Signature: _____

Contact Phone(s): _____ Date: _____