



ECKERD COLLEGE SOCCER CAMPS 2011

BOYS DAY CAMP

AGES: 5-13
\$250 (full day) or \$125 (half-day)
DATES: June 13-17 and June 20-24
CAMP HOURS: 9am-4pm Monday-Friday

GIRLS DAY CAMP

AGES: 4-12
\$220 (full day) or \$125 (half day)
DATES: June 13-17, June 20-24, and
June 27-July 1st
CAMP HOURS: 9am-4pm Mon-Fri

The purpose of the camp is to focus on improving individual technique and tactical awareness through personalized instruction. There will be an emphasis on enhancing each player's passion and appreciation for the game through a positive camp environment. Please, note that the day camps are for the ages specified above. Day camps sessions for the both boys and girls start at 9am and end at 4pm. Half-day sessions end at 11:30am for boys and at 12pm for girls.

Day Camp Schedule

8:30-8:45 a.m. - Drop Off Turley Athletic Complex
9-11:30 a.m. - Field Session I
11:30 a.m. - Half Day Camper Pick up at McArthur Pool
11:30 a.m. - Noon - Pool for half day and Pick up at McArthur Pool

Noon - Lunch
1:00-1:45 p.m. - Rest Time
1:45-3:15 p.m. - Field Session II
3:15-4 p.m. - Pool time and Pick up

Online Resistration Available

www.eckerd.edu/summercamps/boysoccer - and - www.eckerd.edu/summercamps/girlsoccer

Camper's Name: _____ Address: _____
City: _____ State: _____ Zip: _____ Age: _____ DOB: _____ Circle: M or F
Parent/ Guardian: _____ Home Phone: _____ Work: _____
Email Address: _____ Club Team: _____ School: _____
Medical Insurance Company: _____ Policy Number: _____
Family Physician: _____ Phone: _____
Emergency Contact: _____ Phone: _____

I certify that my child is in good physical condition and can partake in the daily schedule of events. I grant permission for the directors of the Eckerd College Soccer Camp to act for me in their best judgment in case of emergency requiring medical attention, including treatment at a local hospital. I hereby waive and release Eckerd College Soccer Camp, its officers and directors and all employees from any liability for personal injury arising out of the applicant's participation in the camp program.

Parent/Guardian Signature: _____ Date: _____

Please, check camps and circle time: Make checks payable to Eckerd College Men Soccer or Eckerd College Women Soccer.

___ Day Camp Boy Full Half June 13-17 ___ Day Camp Girl Full Half June 13-17
___ Day Camp Boy Full Half June 20-24 ___ Day Camp Girl Full Half June 20-24
___ Day Camp Girl Full Half June 27-July1

Total Amount Enclosed: \$ _____

Mail registration forms to: Men's or Women's Soccer Camp Eckerd College 4200 54th Ave South St. Petersburg, FL 33711
Contact: Steve Magee for Boys Camp at 727-864-7697 or Danielle Fotopoulos for Girls Camp at 813-918-8066.

(2)(d) The school is neither indorsing nor sponsoring this event nor approving or endorsing the views of the organization sponsoring the activity.