

BISHOP LEIBOLD

2018 SOCCER CAMP

Date: July 24, 25 & 26

Time: 6:00–8:30 p.m.

Participants: Open to boys and girls who will be entering grades 2–6.

Staffing: Head soccer coaches from Alter and Fenwick High Schools

Cost: \$40 per participant and \$35 for each additional family member
– Cost includes a t-shirt, soccer ball, and nightly gift card drawings.

Registration: Visit blaa.bishopleiboldeagles.com for forms and payment options.

Deadline: Registration will be accepted on a first come first serve basis. We are projecting a camp size of 80 participants, but it could be more. To receive the camp t-shirt, registration must be submitted by **June 9th**.

Location: Soccer fields behind St. Henry's Church

Purpose: The camp will focus on age-appropriate offensive and defensive skill building.

Join us and **HAVE FUN** preparing for the upcoming fall soccer season!

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Dr. Brian T. Kernan, Kernan Oral and Maxillofacial Surgery



Registration Form

By completing and submitting this form with the registration fee (\$40 per participant and \$35 for each additional family member), you grant permission for your child(ren) to participate in the BLS Soccer Camp.

Please complete the following:

Name of Participant(s):

1. _____
Grade this fall: _____ Gender: _____ T-shirt size: _____
2. _____
Grade this fall: _____ Gender: _____ T-shirt size: _____
3. _____
Grade this fall: _____ Gender: _____ T-shirt size: _____
4. _____
Grade this fall: _____ Gender: _____ T-shirt size: _____

Address: _____

City: _____ State: _____ Zip: _____

Mother's Name: _____ Phone Number: _____

Father's Name: _____ Phone Number: _____

Address (if different): _____

City: _____ State: _____ Zip: _____

I, the parent/guardian of the participant(s), a minor, agree that the participant and I will abide by all the rules of the Catholic Archdiocese, BLS Athletics, and St Henry's Parish. Recognizing the possibility of physical injury associated with soccer and in consideration for all who are involved in the organizing and participating (coaches and volunteers) accepting the participant(s) for its soccer camp, I hereby release, discharge and/or otherwise indemnify all organizers, coaches, St Henry's Parish, BLS School and volunteers, their employees and associated personnel, including the owners of the fields and facilities utilized for the Programs against any claim by or on behalf of the participant(s) as a result of the participant(s) participation in the program/camp and/or being transported to or from the same, which transportation is authorized.

Parent/Legal Guardian Name (print): _____

Parent/Legal Guardian (signature): _____

Date: _____

Make Checks Payable to BLAA