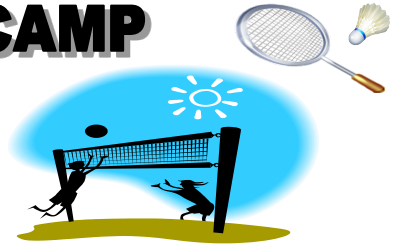


ARIZONA SOCCER ACADEMY OUTDOOR SUMMER SPORTS CAMP



Boys and Girls
Ages 5 ½ - 12 ½



Have fun, be active, gain self-confidence while learning skill development in Soccer and multiple Fun Sports and Activities

Location: **Cactus Park** 7202 East Cactus Road, Scottsdale, Arizona 85260

JUNE 4, 5, 6, 7, 8
\$225 For 1 week

Monday	Tuesday	Wednesday	Thursday	Friday
8:00- 8:50 Soccer	8:00- 8:50 Soccer	8:00- 8:50 Soccer	8:00- 8:50 Soccer	8:00- 8:50 Soccer
9:00- 9:50 Sand soccer	9:00- 9:50 Cube Exercise	9:00- 9:50 Resistance	9:00- 9:50 Trac ball	9:00- 9:50 Sand soccer
10:00-10:30 Sand volleyball	10:00-10:30 Frisbee game	10:00-10:30 Velcro ball	10:00-10:30 Field bowling	10:00-10:30 Sand volleyball
10:30-11:00 Lunch	10:30-11:00 Lunch	10:30-11:00 Lunch	10:30-11:00 Lunch	10:30-11:00 Lunch
11:00-11:50 Horseshoes	11:00-11:50 Badminton	11:00-11:50 Anatomy-Stretching	11:00-11:50 Soccer golf	11:00-11:50 Horseshoes
12:00-1:00 Swimming	12:00-1:00 Swimming	12:00-1:00 Swimming	12:00-1:00 Swimming	12:00-1:00 Swimming

Instructed by professional coaching staff and trainers. Clinic agenda developed by **Tamera Hatfield**, President/Director of Coaching: Professional Soccer Player in Germany; Over 20 years Professional Soccer Coaching and Training; 7-year career in Kinesiotherapy, Sports Medicine, Physical Therapy Clinic.

www.azsocceracademy.com

623.826.3070

azsocceracademy@yahoo.com

----- Cut here -----

How did you hear about us? _____

Player Name: _____ Age: _____ Date of Birth: _____ Sex: _____

Parent(s) Name(s): _____ Email: _____

Phone: _____ Emergency Phone: _____ School: _____

Address: _____ City: _____ State: _____ Zip: _____

By signing this form, I hereby release and indemnify Arizona Soccer Academy, Inc., all affiliated organizations and representatives, from all claims, liabilities, damages or causes of action in connection with the player's participation. I further grant my permission to use names/photograph(s)/video of the above-named player and myself in all publications and all other media, whether now known or hereafter existing, in perpetuity, and for other use. by Arizona Soccer Academy, Inc. I will make no monetary or other claim against Arizona Soccer Academy, Inc, it's representatives, or affiliated organizations. This consent and authorization does not expire.

CONSENT FOR MEDICAL TREATMENT (MINOR): As the parent or legal guardian of the above-named player, I hereby give consent for emergency Medical care prescribed by a duly licensed Doctor of Medicine or Doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve the life, limb or well-being of my dependent. This consent and authorization does not expire.

Signature required

2018 Summer Camp

<input type="checkbox"/> Week 1 \$225.00	
Amount enclosed \$	

_____/_____
Parent or Legal Guardian

Date

Please send this **REGISTRATION FORM** with check or money order payable to:
Arizona Soccer Academy 7558 W. Thunderbird, Suite 1-402
Peoria, Arizona 85381