

Buccaneer/Bobcat Summer

Soccer Camp



June 4th-7th
8:30-11:00 a.m.

Location:
Bay Haven Charter Academy Field
2501 Hawks Landing Blvd, Panama City, FL 32405

Boys and Girls Ages:
4-13

(This is a Community Event, all players interested are welcome)

Early Registration cost \$60
Deadline to early register May 25th
Includes Camp T-shirt

Things to Bring:
Water bottle/Shin guards /Cleats or tennis shoes/healthy snack

The purpose of this camp is to help develop each player through quality/age appropriate training and ultimately to help them progress to the next level!

*We will focus on: **individual skills**-providing an allotted amount of time on the ball

***Team Work** (passing and movement) and Game awareness/Small Sided-games/Soccer language

Spots are limited so sign up today!

Please turn in forms to the front office at North Bay Haven by May 25th!

Cash or check- make checks Payable to NBH Athletics

For more info email Coach J at Morrijl@bayhaven.org

Come train with the NBH girls soccer team and coaches!
Three time District Champs!

~Kick off~ your summer the right way and Invite your Friends!!!

**Buccaneer/Bobcat Summer Soccer Camp
Registration/Waiver and Medical Release Form**

Player's Full Name: _____ Date of Birth: _____ Age: _____

Parent/ Guardian's Full name: _____ Cell/ Work Number _____

E-Mail (important for cancellations due to weather) _____

T- Shirt size: Circle one of the following: YS YM YL AS AM AL

Check One below:

Early Registration \$60. Turned money in by May 25th _____

Late Registration \$75. Turned money in after May 25th _____

Emergency Contact Information:

Name: _____ Relationship: _____ Cell/work #: _____

Health Information: Injuries/illness: YES _____ NO _____ If yes list below:

Medication and Frequency: _____

Special Instruction: _____

I, the undersigned, being the parent or legal guardian of the aforementioned child requesting camp admittance to the Buccaneer/Bobcat soccer camp and use of any facilities do so entirely at their own risk. Furthermore, the applicant is in good health, and suffers from no illness; disability or condition that requires the taking of medication on a regular basis and participant cannot or should not participate in vigorous training or play. I, the undersigned, hereby expressly agree to be responsible for any medical bills incurred in the treatment of any illness or accident. In the event of any such accident or injury, I hereby give my full consent to allowing the camp supervisors and staff to procure any medical treatment deemed necessary and advisable on behalf of my child or ward without prior consent. I understand that, as an applicant, hereby release Jennifer Morris, the camp director, all and every member of the camp staff, and Buccaneer/Bobcat soccer from all and any liability from injury or illness, mental or physical, suffered by the camper during or related to the camp/training.

I, The legal parent/guardian of have read and understand the above and acknowledge and accept full responsibility as described above.

Signed: Dated: