

# Longview Soccer Club 2019 Soccer Camp

## Camp Dates:

Monday, July 15 – Thursday, July 18

**Cost: \$75.00 Includes Jersey**

### Session #1

1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup>, 4<sup>th</sup> grade players

9am – 12pm

### Session #2

5<sup>th</sup>, 6<sup>th</sup>, 7<sup>th</sup>, 8<sup>th</sup> grade players

1pm – 4pm

**All grades are based on Fall of 2019**

Come join the fun at LSC's first soccer camp ran by Local coaches and talent. There will be four days of skill building, competition, and FUN with a focus on individual skills.

### How to Register

- 1> Mail this form to:  
Right Foot Athletics  
4524 Pennsylvania St  
Longview, WA 98632
- 2> Email info to [rightfootathletics@gmail.com](mailto:rightfootathletics@gmail.com)
- 3> Text info to 360-749-7504

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## Registration Form

Check box for the session the player will attend:

Session #1

Session #2

Player Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

City, State, ZIP \_\_\_\_\_

Shirt Size: YS \_\_\_ YM \_\_\_ YL \_\_\_ YXL \_\_\_

AS \_\_\_ AM \_\_\_ AL \_\_\_ AXL \_\_\_

### Medical Release:

1> Please notify the club 2 weeks in advance of Disability requiring special arrangements, assistance, or any condition that would limit participation.

2> I give my approval for my child to attend LSC Soccer camp and certify they are in good health.

3> I authorize the camp staff to act for me regarding any injury or health problem occurring while attending camp.

4> I waive and release LSC Soccer camp staff employees any liability and illness incurred by my child at camp.

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Make Checks payable to Longview Soccer Club**