

Menomonee Falls High School

Preseason Soccer and Conditioning Summer Camp 2017

Date: July 24th - 27th (5:00pm-7:30pm)

Place: Menomonee Falls High School Practice Field

Cost: \$100.00 per player (Checks to Falls Soccer)

Players: All players, both boys and girls, 7th through 12th grade

Equipment: All players need shin guards, flats and/or running shoes, cleats, soccer ball, and any other soccer apparel.

Additional Information:
Contact Scott Stein at
scottstein0409@gmail.com

Please complete waiver and registration form and mail with payment to:
Falls Soccer
P.O. Box 1033
Menomonee Falls, WI 53051

Camper Name: _____ **Phone Number:** _____

Address: _____ **Shirt Size:** _____

_____ **Grade:** _____

Emergency Contact Name & Number: _____

I hereby waive SDMF and Falls Kickers, it's staff and personnel, of all responsibility for injury or damage sustained while participating in the Camp. I acknowledge that soccer is a sport that may result in injury and thus take full responsibility for the treatment of any injury that my child may sustain. By signing this waiver, I acknowledge that the officially registered camp participant is covered by health insurance. I also agree to be available either in person or by phone if an injury does occur. I give the camp staff permission to seek emergency treatment as is warranted and I will provide camp personnel with any medical information that may be needed in order to provide appropriate emergency treatment.

Parent/Guardian Signature: _____ **Date:** _____