

Deep Run Soccer Camp Application

(Please complete one application for each player attending camp)

Player's Name _____

Grade _____ ('07-'08) Date of Birth _____

Name of Parent or Guardian _____

Home Address _____

Phone (Home) _____

Phone (Cell) _____

Emergency Contact _____ Phone _____

School/Club _____

Coach _____

<i>Please circle camp(s) attending.....</i>	
<p>Striker/Keeper Camp <i>(Travel Soccer Players Only)</i></p> <p>Sunday, June 24th through Thursday, June 28th</p> <p>6:00pm – 8:00pm</p> <p>\$85/Player (\$50 for Sibling)</p>	<p>Skills Camp <i>(Intramural and Travel Players)</i></p> <p>Tuesday, Wednesday, Thursday July 10 – 12</p> <p>Tuesday, Wednesday Thursday July 31, August 1 & 2</p> <p>\$15/Session or \$60 for All Six Sessions</p>
<i>Please make checks payable to "DRVSA"</i>	

Waiver and Release

We, the undersigned, for ourselves, our heirs, executors and administrators, waiver, release and forever discharge Deep Run Valley Sports Association; its staff, officers, agents, representatives, employees, successors and assigns of and from all rights and claims for damages to person or property which may be sustained or occur during participation in camp activities, or from camp, whether paid damages, injury or loss are due to negligence or not.

Applicant's Signature _____ Date _____

Father or Guardian Signature _____ Date _____

Mother or Guardian Signature _____ Date _____