

Soccer camp is designed to give campers a fun environment to improve soccer skills, develop social skills and just plain have fun playing soccer.

Where: Indoor Athletic Complex @ CMU

Cost: \$50* includes T-shirt

Time: 6:30pm till 8:00pm

Ages 6 to 14

***all participants bring own ball, shin guards, water bottle and soccer shoes.**

Soccer “The Worlds game”

A Game for All Kids

Information call
(989) 560-3244 or
Email
m_daisy36@yahoo.com
mountpleasantsoccercub.org



8th ANNUAL
Mount Pleasant
Soccer Camp
Feb. 25, March
3, 10, 17, 24 April 7
Monday evenings
6:30pm to 8pm

REGISTRATION FORM

Name _____

Address _____

City _____ zip _____

Phone _____
(Emergency contact)

Grade _____ Age _____

Shirt Size S M L XL XXL

Please enroll me for the following

____ Beginner/Intermediate

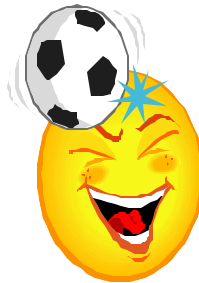
____ Advanced

Make checks for \$50 payable to:

Mt.Pleasant Soccer Club
Soccer Clinic '08
PO Box 1162
Mount Pleasant 48858-1162

CAMP SCHEDULE

Individual Skills Training
Attacking and Finishing
Delaying and Defending
Small Group Games
Fun Activities



Coaching Staff

Mark Daisy, Club coach & MPHS Head Varsity Girls and Boys coach, is the Camp Director. Mark has over 20yrs coaching experience at the Youth, Club and High School level. Former player for Cincinnati Kolping Club, CMU, and high school player, has a combined HS record of 98-45-8. 3 X District Coach of the Year and Conference COY. Staff will include current and former college and high school players who will bring experience and Love of the game to the kids.

Medical release and Waiver of Liability Release

As parent or legal guardian of the child named on this registration, I hereby give my full consent and approval for my child to participate in the Soccer Camp.

I understand that there are certain risks of injury inherent in the practice and play of this sport, as well as other related activities incidental to my child's participation, and I am willing to assume these risks on behalf of my child. I hereby certify that my child is fully capable of participation in the designated sport and that my child is healthy and has no physical or mental disabilities or infirmities that would restrict full participation in these activities, except as listed below.

In addition to giving my full consent for my child's participation, I do hereby waive, release and hold harmless the organizers, coaches, sponsors, supervisors, and representatives for any injury that may be suffered by my child in the normal course of participation in the designated sport and the activities incidental thereto, whether the result of negligence or any other cause.

Parent
signature _____

List any physical limitations allergies,
hearing, sight, ect...

