

Next Level Soccer Camp

Monday June 11th- Thursday June 14th

1:00-3:00pm @ CISA Soccer Fields

Campers will receive a Next Level Soccer t-shirt!

Ages 6-12

Cost: \$80

Please email registration form to nextlevelsoccer@yahoo.com, payment will be collected the first day of camp.

Participant Name: _____

Parent E-mail Address: _____

Parent Phone Number: () L

Birth Year: _____ T-Shirt Size: YM YL AS AM AL

In Case of Emergency, Please Contact:

Name: _____

Relationship: _____

Cell Phone: () -

Liability Wavier: I/We the undersigned parent/legal guardian give permission for _____ to participate in the Next Level Soccer Camp. I/We understand that CISA, CISA volunteers or employees, camp directors, camp employees or anyone acting on its behalf, will not be held liable or responsible for personal injuries and property damage or loss of any kind which may occur during the camp. The above foregoing release has been read and understood by the undersigned. I/We also give permission for any emergency medical care or treatment by a physician, surgeon, hospital or medical care facility that may be required.

Parent/Legal Guardian Signature: _____ Date: _____

