2015 Spring Break Soccer Camp, Monday – Friday, March 23-27th, 3-5pm

About Spring Break Soccer Camp: The 2015 Spring Break Soccer Camp for boys & girls, grades K-8th, will be held at the Philomath High School soccer fields during the week of March 23-27 from 3:00 to 5:00 pm. The first meeting on Monday, March 23, will begin at 3pm (2:45 pm for last minute registrations) at the fields (east Middle School parking lot). The emphasis of the camp will be on skills development, tactics, and just playing soccer, with the mix depending on the age and experience of the participants. The campers will be divided into groups according to their ages & soccer skills. Above all, we intend to promote a greater appreciation of soccer through an enjoyable & productive camp.

Cost: The cost of the camp will be \$40 per player or \$70 per family. All players are welcome, so please let me know if there are any issues around ability to pay the registration fee. The fee includes the cost of the camp and a camp T-shirt. The camp is a fundraiser for the PHS soccer programs, so additional donations are always welcome.

Required equipment? Shinguards are required for camp participation. Soccer cleats are desired but not a must (running shoes are "ok"). Each camper should also bring a water bottle with his/her name on it. **Soccer balls:** I will bring enough soccer balls so each camper will not have to share a soccer ball when doing drills or games.

Registering? Early registration is encouraged and would be helpful for the timely purchase and availability of T-shirts at the beginning of camp. Please fill out the registration form below and return it and the camp payment (make checks payable to PHS) to:

John Williams

23222 Hwy. 20 Philomath, OR 97370 Campers can also register between 2:45 and 3:00 pm, Monday, March 23rd Questions? Concerns? email John: john.l.williams@hp.com

LIABILITY RELEASE FORM —PHILOMATH SCHOOL DISTRICT

- I understand the Spring Break Soccer Camp is voluntary and will expose my child to risks of injuries. Some of these risks are foreseeable, but some are unforeseeable. Examples of risks include physical injury, emotional injury, property damage, economic loss, noneconomic loss, and deprivation of rights, privileges, and immunities. Also, some of these risks cannot be eliminated due to the nature of the Soccer Camp. I understand that these risks could cause harm to my child, his/her property, and harm to other persons.
- I fully recognize the dangers inherent in the Soccer Camp, but I am willing to allow my child to participate in the Camp. In consideration for providing my child the opportunity to participate in the Camp, both my child and I voluntarily agree to hold harmless, waive, release, indemnify, defend, and discharge the Philomath School District 17J ("School District") from all liability and claims arising from my child's participation in the Soccer Camp including, but not limited to, liability and claims arising from the District's negligent acts. I agree to these actions to the fullest extent allowed by law. "School District" includes its Board of Directors, the individual members thereof, and its officers, agents, employees, volunteers, and representatives. "Liability and claims" means demands for any value or benefit, such as lawsuits, tort claims, insurance claims, causes of action, fines, fees, and costs (e.g. medical costs and attorney fees). I further certify and represent that I have the legal authority to waive, discharge, release, and hold harmless the released parties on behalf of myself and the below named participant.
- This Agreement is intended to be as broad and inclusive as is permitted by law. If any provision or any part of any provision of this Agreement is held to be invalid or legally unenforceable for any reason, the remainder of this Agreement shall not be affected thereby and shall remain valid and fully enforceable.
- This is to certify that THE NAMED PARTICIPANT has my permission to attend the Spring Break Soccer Camp. In exchange for the opportunity to participate in the Camp, the player & I voluntarily release the Philomath School District from all liability and claims arising from the player's participation in the Camp. In addition, I authorize the Camp staff to secure the service of a medical services provider or hospital in the event that my child may require emergency medical treatment while participating in the Camp & I will provide for the payment of these expenses
- I certify that I have read this document and fully understand its contents. I have read this document in its entirety and I freely and voluntarily assume all risks of such hazards and notwithstanding such, I agree to allow my child to participate in the Spring Break Soccer Camp.

Participant's Name			D(OB (dd/mm/yyyy <u>)</u>	/ /	Grade	
Address	City						
State/Zip	Phone#	Email					
T-Shirt Size (Please Circle)	Kids XS 2-4 Adult S		L 14-18 KXL	Soccer Experience:			
Emergency Contact			Ph	one			
		Date					
(pa	rent or legal gua	rdian)					
Medical Information:							
Does this person have any l	imitations, aller	gies, or other signif	ficant medic	cal condition? Yes / No)		
If yes, please explain:							
Special medication being ta	ken						
Primary Doctor's Name and							
Medical Insurance Program							