

**New for 2016 – Four-Day Camp With Final Day Tournament!**

**Fourth Annual**

# Floyd Central Soccer Camp

**Wednesday through Saturday, July 13 - 16, 2016**

Early registration through June 23 for boys and girls ages 7-17



**Prepare for a higher level of play** by training and learning with some of the region's best coaches and players at one of the top soccer facilities in the area.

Our goal is to offer individual, technical and tactical training that leads to improved group play prior to the fall season.

Talented and experienced coaches teach:

- First touch, dribbling, attacking moves
- Passing/receiving, keeping possession
- Small group and large group competition
- Goalie specific training
- Saturday tournament team play



## **Schedule:**

### ***Fourth day added this year!***

Wednesday, July 13, through Saturday, July 16

- Age 7-11 – 6:30 to 8 p.m.
- Age 12-14 – 6:30 to 9:30 p.m.
- High School age – 2 to 5 p.m

## **Location:**

Floyd Central High School – Two full-size Bermuda grass soccer fields give players the experience of the high school pitch under the lights.

## **Camp Staff:**

- Floyd Central boys coaching staff – Tim Rice, Scott Menne and Dietrich Rudolph
- Floyd Central girls coach Lewie Stevens
- LCFC asst. coach & former pro Thabane Sutu
- Former UofL player Ryan Smith ('12)
- Former semi-professional Hezekiah Weiss
- Accomplished and experienced Floyd Central Varsity Alumni
- PLUS new elite-level coaches for 2016

## **Camp Registration Fees:**

Ages 7 - 11 – \$70 by June 23; \$80 thereafter

Ages 12 - 17 – \$100 by June 23; \$110 thereafter

*Multi-player discount \$5 per additional sibling.*

## **Registration Includes:**

- **NEW Four-day camp experience**
- Final day tournament play
- 2016 camp t-shirt
- Awards and prizes

# Floyd Central Soccer Camp 2016 REGISTRATION FORM

July 13 through July 16, 2016

Player Name: \_\_\_\_\_

Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_ Gender: M | F Grade (Fall 2016): \_\_\_\_ School \_\_\_\_\_

Current Level of Play: REC REC PLUS CLUB (Circle One)

T-SHIRT SIZE – YS \_\_\_\_ YM \_\_\_\_ YL \_\_\_\_ AS \_\_\_\_ AM \_\_\_\_ AL \_\_\_\_

Want to train with a buddy? List name here: \_\_\_\_\_

Requesting goalie-specific training only? \_\_\_\_ (Check Here)

Parent/Guardian Name(s): \_\_\_\_\_

Best Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ ZIP: \_\_\_\_\_

Alternate Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

## MEDICAL INFORMATION

Insurance Carrier : \_\_\_\_\_ Health Card Number: \_\_\_\_\_

Health Issues: \_\_\_\_\_

## PARENTAL CONSENT

### Medical Care Consent and Release of Liability

1. On behalf of the above named applicant, I release Floyd Central Soccer Camp, the campsite, staff and management from any claim arising from participation in the camp. Neither Floyd Central nor anyone connected with the camp assumes any responsibility for accidents, medical or dental or any other expense incurred as a result of attendance of the camp. I hereby certify that the above-named applicant is physically fit to participate in camp activities. I accept full responsibility for any medical problems that may develop as a result of any activities.

2. I authorize all medical, surgical, diagnostic, and hospital procedures as may be performed or prescribed by a treating physician for my child, if I cannot be reached in an emergency.

3. I authorize the use of participants' image in photographs taken during Floyd Central Soccer Camp to be used for future camp promotional purposes.

\_\_\_\_\_  
Parent/Guardian Name (print)

\_\_\_\_\_/\_\_\_\_/\_\_\_\_  
Parent/Guardian Signature / Date

*To register, make check payable to: FC Athletics – Soccer Camp, attach this form and mail to FC Soccer Camp, 3030 Fairway Drive, Floyds Knobs, IN 47119*

Questions? Email Camp Director:  
scottmenne@gmail.com