

# 2008 FISHERS SOCCER SUMMER CAMPS

Fishers Soccer Club and US Youth Soccer Camps have designed a summer skills program for all Players ages 4 thru 14

## ALL Players (Ages 8 THRU14) Camp Fee \$100

Developing of individual player's ball skills

Camp  
**A**

A(1) JULY 21<sup>st</sup> - JULY 25<sup>TH</sup> ( 4:30pm till 7:30pm)

Select one  
camp date  
A1 OR A2



A(2) JULY 28<sup>TH</sup> - AUGUST 1<sup>ST</sup> ( 4:30pm till 7:30pm)

**MONDAY THRU FRIDAY (3 HOURS PER DAY)**

## ALL Players (Ages 4 thru 7) Camp Fee \$45

Camp  
**B**

Learning the Soccer FUNdamentals

B(1) JULY 21<sup>ST</sup> - JULY 25<sup>th</sup> ( 4pm till 5pm)

Select one  
camp date  
B1 OR B2



B (2) JULY 28<sup>th</sup> - AUGUST 1<sup>ST</sup> ( 4pm till 5pm)

**MONDAY THRU FRIDAY (1 HOUR PER DAY)**

## CAMPS HELD AT (106<sup>th</sup> & Cumberland Road, Fishers)

Sign ups Accepted till July 10<sup>th</sup> Checks ONLY to SOCCER CONSULTANTS, INC.

9881 Cascades Court Fishers. Indiana 46037

(telephone )# 317.658 1411 (email) [soccerconsultants@sbcglobal.net](mailto:soccerconsultants@sbcglobal.net)

→ Cut here

All campers will receive email sign up confirmation

### REGISTRATION

Camp # \_\_\_\_\_ Age \_\_\_\_\_ Fee \$ \_\_\_\_\_

Name \_\_\_\_\_  
(Last) (First)

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Tel#(H) \_\_\_\_\_

Tel#(W) \_\_\_\_\_

Health Ins. Carrier \_\_\_\_\_ Policy# \_\_\_\_\_

### WAIVER

I allow \_\_\_\_\_ to participate in the FSC / US Youth Soccer Summer Camps. I hereby release and agree to hold harmless, FSC/ US Youth Soccer Camps (Soccer Consultants, Inc.) coaches and staff in the event of an injury each participant will bring their own soccer ball, shin guards, and adequate water supply. I have carefully read the above waiver. I understand this is a release of liability and sign it voluntarily.

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

Signature \_\_\_\_\_ Date \_\_\_\_\_

Email: \_\_\_\_\_