

Pre Season Soccer Camp

The Pittsford Recreation Department is sponsoring a Pre-season Summer Camp for boys & girls entering grades 1st - 12th. Coach John White will be administrating the camp at the Pittsford Recreation Area, July 17, 18 & 19-Times 5:00 – 7:00 pm. This camp is open to kids who live in the Rutland Northeast Supervisory Union and outlying areas.

Each day will include skill sessions, physical fitness drills, and live games.

Camp will emphasize proper soccer techniques and attitude in an effort to better the player's game & character.



Guest coach will be US SOCCER Development Academy player and UVM commit Olivia White!!!

Participants will be divided appropriately by age and skill level.

Fee: \$25 per child

(Includes free swimming at the Rec Area after workouts)

Free soccer ball & t-shirt

free shirts/balls while supplies last!

YOUR DEADLINE TO REGISTER IS July 12.

Please complete this registration form and return to the Pittsford Recreation Department!

NAME of PARENT/LEGAL GUARDIAN: _____

EMAIL ADDRESS: _____ SHIRT SIZE: _____

HOME PHONE: _____ CELL PHONE: _____

EMERGENCY CONTACT: _____ PHONE: _____

ALLERGIES OR CONDITIONS WE SHOULD KNOW ABOUT?: _____

CHILD'S NAME: _____ AGE: _____ GRADE: _____ GENDER: _____

All programs are available on a first come, first serve basis. Early sign-up assures placement. With the proper fees you may bring your form into the Town Offices Mon-Wed 8am-4:30pm, Thur. 8am-6pm & Fri 8am-3pm, you can also mail it, or drop in the After-Hours Drop Box located near the exit of Town Offices parking lot.

PLEASE READ CAREFULLY

Release: I understand there are risks of physical injury in participating in sports and recreational activities. I hereby release the TOWN OF PITTSFORD, its employees, and agents from any liability or personal injury, or loss or damage to personal property which I or my child may experience in connection with activities sponsored by the Pittsford Rec. Dept. I hereby consent to any medical procedures deemed advisable for my child in the event I cannot be reached and my child has sustained an injury. The dept. does not provide accident or hospitalization insurance for participants of its programs. All participants are advised to have adequate personal coverage. Please consider ones own health, experience, and tolerance for risk before participating in any Recreation program.

X
Signature of parent or Legal Guardian

Date: _____