

## 2009 Avalanche Elite Youth Soccer Camp

We are excited to announce the dates for our Utah Avalanche Summer Camp. This year we will be hosting our Elite Youth Camp the week of June 8-12th, 2009 from 9am-12pm. The Elite Youth Camp is designed for our younger players aged 5-13 who desire to compete at the Premier level. The camp will focus on stimulating the love for the game in young athletes while working hard, improving ball skills, and having lots of fun. Technical sessions will focus on individual ball skills, passing and receiving, finishing, and heading through fun and competitive games. At the end of each session, the girls will be divided into teams and will have a mini tournament throughout the week, with the intent to use what they have learned and apply it to the game. Please join staff coaches Ananda O'Neal, Megan Dickerson, and Gabe Smart for another excellent summer soccer camp.

### Highlights

\* low player to staff ratio 12:1, personal evaluation upon request, camp awards given to most Improved player, Camp All-Star, Winners of the camp tournament

### Session and Fees

(ages 5-13)

June 8 -June 12th

9:00 a.m - 12:00 p.m.

Cost: \$125

Location: Storm Mountain Park

### Camp Registration

- Registration forms can be found on the club website, [www.utahavalanche.com](http://www.utahavalanche.com). Print the form and mail it in.
- REGISTER EARLY and quickly to secure a spot

**2009 Avalanche Elite Youth Soccer Camp**

**Player Information**

_____	_____	_____	
Last Name	First Name	Birth date	
_____	_____	_____	_____
Address	City	State	Zip Code
_____	_____		
Phone number	Current Team		

**Fathers Information**

**Mothers Information**

_____	_____	_____	_____
Last Name	First	Last name	First
_____	_____	_____	_____
Cell Phone	Work phone	Cell phone	Work Phone
_____	_____		
Email	Email		

**Camper Medical Information**

_____		_____
Doctors name		Doctors phone
_____	_____	_____
Emergency contact name	Relationship	Phone

I hereby give permission for my child to participate in the Utah Avalanche Youth Soccer Camp and agree to comply with all of its rules and regulations. I do hereby expressly and specifically assume all of the risks which attend the game of soccer and any other sports related activities, including but not limited to physical contact and physical injuries. I agree to indemnify and hold harmless the Utah Avalanche Girls Soccer Club Foundation, Inc. its officers, coaches, trainers, employees, agents, and related entities (hereafter referred to as the "Utah Avalanche") including but not limited to any adjoining facilities from any and all claims, suits, or proceedings arising allegedly or in reality out of acts or omission and participation of the undersigned in any related activity. I further agree to release and discharge, indemnify and hold harmless Utah Avalanche from any and all claims or suits arising out of the acts or omission or participation of Player in any soccer-related activity conducted by Utah Avalanche. As the parent or legal guardian of the above player, I hereby give consent to emergency medical care. This care may be given under whatever conditions are necessary to preserve the life, limb, pr well-being of this minor, named above. I understand \$25 of my fee is nonrefundable. I agree to all the terms of the Agreement described above as parent, responsible party and guardian of player shown above.

_____	_____
Parent Guardian Signature	Date

Enclosed is my check/cash of \$ \_\_\_\_\_ check # \_\_\_\_\_

-make check payable to Utah Avalanche Girls Soccer Club

Send to Gabe Smart address: 1672 West 3180 N #F1

Lehi UT 84043

T-shirt Size: \_\_\_YM\_\_\_YL\_\_\_YXL\_\_\_YS