Registration Form

Child's Name _____

Parent/Guardian

Name _____

Address _____

City _____ St _____ Zip _____

Email _____

Home Phone _____

Cell Phone _____

Child's Age (as of 7/8/13) _____ Sex _____

Child's Birth date _____

T-shirt size (please circle one):

YS YM YL YXL AS AM

Ages 7 & older: $125
Ages 4, 5 & 6: $85

Checks Payable to: HMMS

Full payment is required with each registration. A minimum, non-refundable, deposit of $25 will be retained for any registration cancelled after June 15th.*

Please mail completed form & payment to:

HMMS SOCCER CAMP
6206 Wallingford Way
Mechanicsburg, PA 17050-7371

hmmssoccer@comcast.net

HMMS Soccer
6206 Wallingford Way
Mechanicsburg, PA 17050

HMMS Youth Soccer Association

10th Annual Developmental Camp

July 8 – 12, 2013

Ages 7 & older: 9:00 AM – 12 NOON
Ages 4, 5 & 6: 6:00 PM – 8:00 PM

Gino DiFlorio, HMMS Technical Director

Schedule

Monday – Friday
Foot skills ~ Fundamental training ~ Small Sided Games ~ Scrimmages
In addition, on Friday
Pizza party and Closing Ceremony

Location

Hampden Park Fields 1, 2 & 4 – near park pavilion.

Players

- All players are to bring water bottles
- Must wear an appropriate T-shirt, shorts, soccer socks and shin guards
- T-shirts must be tucked into shorts & shin guards inside socks at all times
- Please wear camp T-shirts on last day

Camp Program

- Each player will stay with their group for the whole camp
- Camp will run at its scheduled time Monday through Friday
- Program is designed for player development, fundamentals, and game skills
- Structure, organization & discipline will be the key
- The goal of the program is to develop soccer skills while maintaining the fun of playing soccer.

Each Camper Receives

- Age Specific Soccer Ball
- Camp T-shirt & Certificate of Completion
- Professional Instruction & Structure
- Pizza Party on Friday

Pricing

Developmental Camp
Ages 7 & older: $125 (9:00 AM–12 NOON)
Ages 4, 5 & 6: $85 (6:00 PM – 8:00 PM)

Coaches

Coaching will be supervised by professional and college players with high school players as assistants.

Sponsors

- Spilman Thomas & Battle, PLLC
- Sun Motor Cars
- Cumberland Orthopedic
- Zelenkofske Axelrod LLC
- Freysinger Auto Group
- Rita's Italian Ice of Lemoyne and New Cumberland
- Mars, Incorporated
- Al's of Hampden

I, the parent/guardian of the registrant, a minor, agree that I and the registrant will abide by the rules of HMMS Soccer, recognizing that the possibility exists for physical injury associated with soccer, and in consideration for HMMS Soccer. I hereby release, discharge and/or otherwise indemnify HMMS Soccer, their affiliated organizations, sponsors, their employees and associated personnel, and its coaches and the owners of the fields and facilities utilized for the soccer sessions, against any claim by or on the registrant's participation in the program. I further certify that my son/daughter has permission to participate and that he/she is covered by personal health/accident insurance. This is to certify that I / We, (*please print your name on the line below*) _____, the parents or legal guardian of the person listed below, do constitute and appoint HMMS Soccer and their representatives the power to authorize and consent to the administration of any medical treatment deemed necessary by the attending physician to the below named minor.

Player's Name _____

Date of Last Tetanus Booster _____

Known Allergies _____

Preferred Physician-Dr. _____

Dr. Phone _____

Insurance Company _____

Policy Number/Group Number _____

Person to contact in case of emergency:

Name _____

Relation _____

Phone # _____

Current Medications _____

Signature of Parent or Guardian

_____

Date _____

Please attach separate sheet if more space is needed.