

\$225 PER PERSON

Mail to P.O Box 5020 , St. Mary's City, Maryland 20686

For additional information Call: (240) 895-4321 * Fax (240) 895-4480

Make checks payable to **Seahawks Soccer Camps**

Name _____ Grade In _____ Age _____ M/F _____

Mother/Guardian _____ Father/Guardian _____

Day Phone #1 () _____ Day Phone #2 () _____

Cell Phone #1 () _____ Cell Phone #2() _____

Address _____ City _____ State _____ Zip _____

Team/Group _____ *Mandatory E-Mail _____

Birthdate _____ Medical Conditions _____

I hereby authorize the staff of Seahawks Soccer to act for me in their best judgment in any emergency requiring medical attention and I hereby waive and release Seahawks Soccer from any and all liability for injuries or illnesses incurred while at the Camp. I have no knowledge of any physical impairment that would be affected by the above named campers participation in the camp program. I understand that I am required to attain and carry accident medical insurance coverage for the child listed on this application, and I verify that the coverage information attached herewith is accurate and true. I understand the camp is not responsible for lost or stolen articles. I also understand the camp retains the right to use for publicity and advertising purposes photographs of campers.

Parent/Guardian Signature _____ Date _____ I-Shirt Size YM YL S M L XL

Health Insurance Co. _____ Policy # _____



***Summer Day Camp
Soccer Camp 2010
Free Ball & T-Shirt***

\$225/player

Includes lunch daily in dining hall

\$100 Non-Refundable Deposit by June 15th

Sorry, No Discount Available

Technical/Tactical Training.

Swimming daily

Small Sided Games each session.

Great Deal for 2010 – Price REDUCED \$60

Monday - Friday

June 28th – July 2nd

BOYS & Girls ages 6-17

9am-4pm Daily

St. Mary's College

240-895-4321

Herb Gainey, Head Coach

240-895-4321 (Office)

240-895-4480 (Fax)

whgainey@smcm.edu

