



**2012 MOON LADY TIGERS SOCCER CAMP
FOR BOYS AND GIRLS**

U-6 to U-12

Monday, June 25 to Thursday, June 28 – 4 DAY CAMP

9:00 a.m. to 11:30 a.m. OR 6:00 p.m. to 8:30 p.m.

Moon High School Stadium

The Moon Lady Tigers Soccer Camp is open to all boys and girls in the U-6 through U-12 age groups. Our 4 day camp is run by Head Coach, Bill Pfeifer and his very successful Moon Lady Tigers High School Soccer Team. Last season over 100 kids participated in our youth camp. Our youngest campers will learn and improve their basic soccer skills and techniques through age appropriate training and enjoyable games; for our older campers, we focus on development. The curriculum emphasizes the importance of combining technical skill and tactical decisions. Players will be grouped according to age and ability. This camp is offered as a morning or evening camp. Every camper will receive a Moon Soccer T-shirt.

Camp fees: \$80 per Camper. Additional family members: \$65 each.

Cost includes Moon Soccer T-shirt!

Each camper should bring: A ball, shin guards covered with socks, water bottle and sunscreen

Fill out this form and medical release form on the back and mail by JUNE 1st

Name(s) 1. _____ boy/girl 2. _____ boy/girl
3. _____ boy/girl

Birthdate(s) 1. ____/____/____ age ____ 2. ____/____/____ age ____ 3. ____/____/____ age ____

Address _____ City _____ Zip code _____

Phone # _____

Email _____ We will confirm camp reservation by email.

Check which Session: Morning 9:00 a.m. to 11:30 a.m. OR Evening 6:00 p.m. to 8:30 p.m.

T-shirt size: Youth Small ____ Youth Medium ____ Youth Large ____

Adult Small ____ Adult Medium ____ Adult Large ____

Parent/ Guardian Signature _____

Applicant is in good health and has my permission to participate in this camp.

Make checks payable to: **Moon Girls Soccer Boosters** and mail to: Moon Girls Soccer Booster
116 Bon Highland Dr
Moon Twp, PA 15108

Amount paid _____ Check # _____

Questions? Please contact us at 412-580-5150 or kb6419@yahoo.com

**MOON LADY TIGERS SOCCER CAMP MEDICAL RELEASE FORM
June 25-28, 2012**

Player's Name(s):

1. _____ 2. _____ 3. _____

Birthdate(s)

1. _____ 2. _____ 3. _____

Emergency Information during camp hours:

Parent/Guardian _____ home# _____ cell _____

Parent/Guardian _____ home# _____ cell _____

In an emergency, when the parent/guardian cannot be reached:

Name: _____ home# _____ cell _____

Allergies: Player 1. _____ 2. _____

3. _____

Other Conditions we should know about: Player 1. _____

2. _____ 3. _____

PARENT'S APPROVAL AND RELEASE

Recognizing the possibility of physical injury associated with soccer and in consideration for player's participation and receiving instruction in the MOON LADY TIGERS SOCCER TEAM camp I hereby release, discharge and/or otherwise agree to indemnify the MOON LADY TIGERS SOCCER TEAM and any and all persons connected with it, from and against any and all claims for personal injury by the player as a result of the player's participation in the soccer camp, and verify I am authorized to do so as parent or guardian of the player.

Signature of Parent/Guardian

Date Signed