

# GIRLS AND BOYS SOCCER CAMP 3RD - 12TH GRADE

## DATE, TIMES & LOCATION

**May 29 - June 1**

5:00 - 6:30pm / 3rd - 5th Gr  
6:30 - 8:00pm / 6th - 12th Gr

*Camp will be on the  
NCS Baseball Field*

## CAMP STAFF

**NCS Varsity Boys  
and Girls Coaches**

## CAMP GOALS

**Foot Skills  
Shooting  
Passing  
Small Sided Games  
Proper Techniques**

## WHAT TO BRING

**Water  
Proper Shoes  
Shin Guards  
Athletic Wear  
A Great Attitude**

**NORTHWEST CHRISTIAN SCHOOL GYMNASIUM - 16401 N. 43RD AVE - PHOENIX AZ - 602.978.5134**

Name: \_\_\_\_\_ Grade going into Fall 2018 \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Emergency Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Shirt Size: \_\_\_\_\_

Cost includes a camp shirt & soccer ball! →

**COST: \$75  
DUE 5/11**

*Camp fee is due at time of registration. Please make check payable to NCS.*

I \_\_\_\_\_ declare that I am the \_\_\_\_\_ of \_\_\_\_\_.

I hereby authorize the staff of Northwest Christian School in the city of Phoenix, state of Arizona, to consent to any x-ray examination, anesthetic, medical or surgical diagnosis or treatment and health care necessitated by injury or illness while the above named child is attending Northwest Christian School's Sport Camps. Such treatment is to be rendered to the minor under the general or special surgeon licensed to practice in the State of Arizona. I hereby waive and release the camp from any and all liability for injuries or illness incurred while at camp.

I certify that I fully understand this authorization.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_ Insurance Co.: \_\_\_\_\_

Policy #: \_\_\_\_\_