

\$75

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# Elite SOCCER ACADEMY

## SPRING BREAK SOCCER SCHOOL

MARCH 29<sup>TH</sup> – APRIL 1<sup>ST</sup> 2010

**The Elite Soccer Academy Spring Break Soccer School** is designed to develop and enhance a player’s technical and tactical abilities. We have a strong commitment to providing excellent soccer instruction in a safe environment, where the players will have an enjoyable, positive learning experience. Elite Soccer Academy staff shares a passion and dedication to those who are committed to learning and developing their game.

**Instruction:**

We pride ourselves in being a teaching academy. All sessions are under the direction of Rick Mullins. Rick is a United States Soccer Federation “A”, NSCAA Advanced National and National Youth Licensed coach. He also is an athletic hall of fame inductee at the Community Colleges of Spokane. Additional staff includes other nationally licensed coaches.

**Dates:** Monday March 29<sup>th</sup> thru Thursday April 1<sup>st</sup>.

**All training conducted at:** Barker High School, 13313 E Broadway, Spokane Valley, WA 99216

**Age groups:** Open to ALL Boys and Girls recreational and competitive players.

Age groups	Dates	Time	Location	Cost
9-11 years of age	March 29-April 1	9:00 – 11:00 am	Barker High School	\$75
12-14 years of age	March 29-April 1	9:00 – 11:00 am	Barker High School	\$75

**Cost per participant:** \$75 pre-registration -\$85 if mailed or registered one week or less prior to start of camp

**Refund Policy:** No refund will be given for voluntary withdrawal or after signing up for a session

**Free Camp T-shirt:** All participants receive a free camp T-shirt

**How do I sign up?**

Complete the Spring break waiver and return it along with your check to the Spokane Soccer Club and mail it to: (No cash please)

Rick Mullins,  
C/O The Spokane Soccer Club  
3122 N 11<sup>th</sup> St  
Coeur d'Alene, ID 83815

\*All participants must bring a ball, soccer shoes, shin guards, water, and appropriate clothing.  
\*For more info: Please contact Rick Mullins (208) 818-1790 or email [rickmullins@spokanesoccerclub.com](mailto:rickmullins@spokanesoccerclub.com)

## **ELITE SPRING BREAK SOCCER SCHOOL REGISTRATION**

Player's Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone # \_\_\_\_\_ Sex \_\_\_\_\_

Parent/Guardian \_\_\_\_\_ Cell #: \_\_\_\_\_ Cell

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

Age: \_\_\_\_\_

Email \_\_\_\_\_

Emergency Contact \_\_\_\_\_

Emergency Phone # \_\_\_\_\_

Allergies \_\_\_\_\_

Chronic Medical Condition \_\_\_\_\_

Academy Participant Birth date \_\_\_\_\_

**T-Shirt Size: YL AS AM AL AXL (please circle one)**

### **Medical Care, Consent, & Release of Liability**

I, the parent/guardian of the registrant, a minor, agree that I and the registrant will abide by the rules of Spokane Soccer Club. Recognizing the possibility of physical injury associated with soccer and/or the sudden illness in an event, and in consideration for SSC and its affiliates accepting the registrant for its soccer programs and activities, I hereby release, discharge and/or otherwise indemnify SSC and its affiliated organizations and sponsors, their employees and associated personnel against any claim by or on behalf of the registrant as a result of the registrant's participation in the program. My son/daughter has received a physical examination by a physician and has been found physically capable of participating in the programs. I hereby give my consent to have an athletic trainer, emergency personnel, and/or doctor of medicine or dentistry provide my son/daughter with medical assistance and/or treatment and agree to be responsible financially for the reasonable assistance and/or treatment.

**Parent/Guardian Signature**

\_\_\_\_\_

Date: \_\_\_\_\_