

**LIABILITY RELEASE AND MEDICAL
AUTHORIZATION
For CCS Eagle Soccer Camp**

As parent or guardian of the child named below, I give my permission for my child to attend the *CCS Eagle Soccer Camp*. I give permission for the adult staff to provide transportation for my child in an emergency. In the event of an emergency I authorize the administration of basic first aid. I also authorize appropriate treatment by emergency medical personnel.

By signing this release, I agree that if my child is injured in any way while participating in activities at *CCS Eagle Soccer Camp*, I voluntarily release the school or camp staff from any and all liability for the injuries.

I understand and agree that this release applies to not only me but also my estate, heirs and assigns. In the event some other person seeks compensation for these released liabilities, my estate or I will hold harmless the school or camp staff.

I understand that the camp is under the direction of competent adult coaches and that the staff may include both adults and high school athletes. I am aware that participants may be injured while participating in the supervised drills and events.

I understand that photographs or video footage may or may not be taken of my child while at *CCS Eagle Soccer Camp*. I give my permission to use photographs or videos for promotional purposes including brochures or a promotional video.

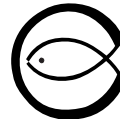
I have read this release; I understand it; and I fully agree to all of its terms.

Signature of Parent or
Guardian: _____

Date: _____

Name of Parent or Guardian
(print): _____

Child's Name
(Print) _____



1300 19th Ave SW
Willmar MN 56201

Phone: 320-235-0592
Fax: 320-235-0620
www.willmarccs.org

**2009
Eagle
Soccer Camp
Boys and Girls
Grades 5 - 8
(2009-2010 school year)
August 10th - 14th
6:00 - 8:00 PM**



**Community Christian School
1300 19th Avenue SW
Willmar, MN 56201**

Phone: 320-235-0592
2009
Eagle
Soccer Camp

August 10th – 14th
Grades 5 - 8 (for 2009-2010 school year)
6:00 – 8:00 PM - Rain or Shine
Community Christian School Soccer Field

Registration Deadlines:
Registration fee of \$30 due by **May 29th.**

Cost includes five days of soccer instruction, character development, and camp T-shirt.



The Eagle Soccer Camp is a Christian camp for boys and girls who are entering grades 5-8. Our goal is to provide sound instruction in the fundamentals of soccer while also focusing on the character development of each participant. Each session will include a

devotional as well as instruction and practice in all aspects of the game.

Camp Director

Mike Ackerman

Mr. Ackerman is the soccer coach at Community Christian School as well as a father of three boys. He loves soccer and young people and is committed to helping them grow in character and soccer skills.

Coach Ackerman will be enlisting the help of one or more assistant coaches to help keep the player to coach ratio down.

Make checks payable to Community Christian School.

Please complete a separate registration form for each child participating. The completed registration form and liability release form must accompany your payment.

If you have any questions please contact the school at 235-0592.

Soccer Camp **Registration Form** **Registration Due by May 29th - \$30**

Mail registration form/liability release along with your payment to:
Community Christian School
Attn: athletic director
1300 19th Ave. S.W.
Willmar, MN 56201

Parents Name: _____
Address: _____
City/State/Zip: _____
Phone: _____
Cell Phone: _____
Emergency Contact: _____
Phone: _____
Participant Name: _____
Gender: Boy _____ Girl _____
Birthdate: _____
Grade in '09 - '10
5th ___ 6th ___ 7th ___ 8th ___

Please inform us of any medical concerns or physical limitations that we should know about your child. _____

T-Shirt Information: Each participant will receive a t-shirt. Please indicate the size needed below.
Youth M ___ L ___ Adult S ___ M ___ L ___ XL ___