**Southwest High**

**2016 Youth Soccer Camp Registration Form**

**Register Using This Form, or online at** <http://youthcampsignup.southwest-soccer.com/>

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Player Last Name: | |  | | First Name: | | |  | | | |
| Address: |  | | | City, State, Zip: | | |  | | | |
| Home phone: |  | | | Player phone: | | |  | | | |
| Player email: |  | | | Date of birth:  (mm/dd/yyyy) | | | | Age on 8/8/16: | |  |
| School attending in 2016: | | |  | | Grade in 2016-2017: | | | |  | |
| T-Shirt: | Choose: Youth Adult | | | | | Choose: S M L XL | | | | |

**Emergency Contact, Permission to Play and Waiver**

*My child/ward has my permission to participate in the Southwest Lakers Soccer Camp. Recognizing the possibility of physical injury associated with soccer, I hereby discharge, release, and/or otherwise indemnify Southwest Lakers Soccer, the coaches, affiliated organizations and other associated personnel against any claim on behalf of my child/ward as a result of my child/ ward’s preparation for, travel to and from, and participation in said program, wherever and however any claim may arise.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Parent/guardian Last Name: | | |  | First Name: |  |
| Address: |  | | | City, State, Zip: |  |
| Home phone: |  | | | Other phone: |  |
| Parent/guardian email: | |  | | | |
| Parent/guardian Last Name: | | |  | First Name: |  |
| Address: |  | | | City, State, Zip: |  |
| Home phone: |  | | | Other phone: |  |
| Parent/guardian email: | |  | | | |
| One parent/guardian signature required: | | | | | |

*The Southwest Men’s Boosters Summer Youth Soccer Camp will comply with the Americans with Disabilities Act (ADA) and make reasonable modifications to enable campers with disabilities to participate fully in all camp programs and activities. We invite parents or guardians who are registering a camper with special needs to contact Dale Peterson (*[youthcamp@southwest-soccer.com](mailto:youthcamp@southwest-soccer.com)) *registration, so that a smooth inclusion in camp activities may occur.*

|  |  |
| --- | --- |
| **Cost: 75.00** | *Registration is complete when the completed form (online or hard copy) and payment are received.* |

**Payment method:** check (preferred – payable to Southwest Men’s Soccer Booster)

credit card (Visa, Mastercard AMEX, Discover accepted on site only on the first day)

**Print and mail completed form and check: Southwest Soccer Camp, 4733 Ewing Ave. S,  Mpls. MN 55410**

**Questions?**  Contact Dale Peterson at 612-655-2796 or [youthcamp@southwest-soccer.com](mailto:youthcamp@southwest-soccer.com).