

Camp Registration

Name _____

Address: _____

Phone # _____

E-Mail: _____

DOB _____

Please check camp attending:

June 8-10	8am-10:30am	Ages U9-U12	<input type="checkbox"/>
	5:30p-8:00p	Ages U13-U16	<input type="checkbox"/>
August 1-3	8am-10:30am	Ages U9-U12	<input type="checkbox"/>
	5:30p-8:00p	Ages U13-U16	<input type="checkbox"/>

Waiver and Release

I waive and release Louie Sahin, Futbol Club of Santa Rosa and any employees or volunteers from all liability by my child participation in the camp. This includes but does not limit injury or illness incurred during participation in the Summer Camp . I, as parent/ guardian, assume the risks and hereby give my permission for emergency treatment in the event I cannot be reached.

Parent/ Guardian Signature:

Printed Name: _____

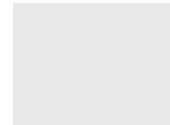
Phone # _____

Emergency # _____



2009 SUMMER CAMPS

LEVENT SAHIN
5953 JAMESON CR
PACE FL 32571



Futbol Club



of Santa Rosa



Camp Director

Coach Levent (Louie) Sahin

- Director Of Coaching FCSR
- United States Federation "A" License
- Turkish FA "A" License
- USSF National Youth License
- National Soccer Coaches of America Premier Diploma
- NSCAA Advanced National Diploma
- NSCAA Director of Coaching Diploma

Summer Schedule

Dates	Time	
June 8-10	8am-10:30am	Ages U9-U12
	5:30p-8:00p	Ages U13-U16
August 1-3	8am-10:30am	Ages U9-U12
	5:30p-8:00p	Ages U13-U16

Make checks payable to:
Louie Sahin

Mail to:
5953 Jameson Circle
Pace FL 32571.
For more info call (850) 686-0192

Camper Equipment Checklist

	Soccer Ball
	Shin Guards
	Soccer Shoes
	Sunscreen
	Water & Snack
	Positive Attitude

Camp Registration is \$75.00 for all camps
Limited space is available.
Registration fee is non-refundable.