

2011 SOCCER DAY CAMPS



Judson University's 80 acre campus is located along the Fox River in Elgin, Illinois. Judson is on the southeast corner of Interstate 90 (Northwest Tollway) and Rt. 31. Camp facilities include 3 volleyball/basketball courts in our fully air-conditioned Lindner Fitness Center and ample space, both indoor and outdoor, for camp activities

Phone: 847/628-1590 Email: jandresen@judsonu.edu

The Judson University Soccer Camp is designed to offer each camper an enjoyable and rewarding soccer experience. Day camp is generally geared toward the beginning soccer player. Our program is structured to meet the needs of individual campers based on such criteria as age, ability and experience. Training and competitive groups will be chosen to assure a motivating and enjoyable atmosphere for each player.

The camp director is Steve Burke, Judson University Men's Soccer coach

Each Camper will receive a shirt and ball at time of registration

**ALL CAMPERS MUST PRE-REGISTER BY FILLING OUT AND MAILING THE COMPLETE FORM TO:
JUDSON SUMMER CAMPS, 1151 N. STATE ST., ELGIN, IL 60123
ALONG WITH A NON-REFUNDABLE DEPOSIT OR FULL PAYMENT**

PLEASE PUT A CHECK MARK BEFORE THE CAMP YOU ARE REGISTERING FOR.

<input type="checkbox"/>	June 20-23 Grades K - 7	9AM - 4PM	Full Day	\$190.00 (Deposit: \$80)
<input type="checkbox"/>	June 20-23 Grades K - 3	9AM - 12PM	Half Day	\$100.00 (Deposit: \$50)
<input type="checkbox"/>	June 27-30 Grades K - 7	9AM - 4PM	Full Day	\$190.00 (Deposit: \$80)
<input type="checkbox"/>	June 27-30 Grades K - 3	9AM - 12PM	Half Day	\$100.00 (Deposit: \$50)

**Registration will take place at 8:30am on the first day of camp,
and all balances will be due at that time.**

NAME _____ SEX **F** **M** AGE _____
STREET _____ CITY _____
STATE _____ ZIP _____ TEAM AFFILIATION & LEAGUE _____
HOME PHONE (____) _____ EMAIL ADDRESS _____

MOTHER'S NAME _____ FATHER'S NAME _____

T Shirt Size (circle one): **Child M** **Child Lg** **Adult S** **Adult M** **Adult Lg** **Adult XL**

EMERGENCY CONTACT _____ (RELATIONSHIP) _____ PHONE (____) _____

WAIVER AND RELEASE: I hereby authorize the staff of the Judson University Summer Sports Camps to act for me according to their best judgment in any emergency requiring medical attention, except as notified below (*). Furthermore, I hereby release Judson University Summer Sports Camps and their agents from any cause of action I may have during these camps. I also give Judson University permission to use any photographs taken of my child for future publications.

PARENT OR GUARDIAN SIGNATURE _____

Judson University complies with federal and state requirements for non-discrimination on the basis of disability, sex, race, color, age, creed and national or ethnic origin in admission and access to its programs and activities.