2008 Steve Rodrigues Soccer Clinic

Monday, July 7 – Friday, July 11th
5:00PM – 7:30P
For Boys and Girls, Ages 8 – 14
Field Location: Lower Dodgeville (680 South Main St., Attleboro MA)

Camp Goal:

Teach proper technique, positions, and movement on the soccer field to enable the players to understand and play the game of soccer to the best of their ability.

Fee Schedule (full fee due with application): $120.00 due 6/15 (early registration due 5/20 $100.00)

Make check payable to: Steven Rodrigues

Mail payment and registration to:
Steven Rodrigues
766 County Street
Attleboro, MA 02703

For questions please contact Steve at 774-254-2226 or Stever825@verizon.net

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Deadline is June 15, 2008
Registration Application:

Name: _____Address: _____

E-mail: _____Home Phone: _____

Parent's Work Phone: _____

Age: _____ Sex: _____

Circle shirt size:
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The Steve Rodrigues Soccer Clinic, directors, and staff are not responsible for accidents resulting in medical, dental or other expenses. Participants are responsible for property and can be sent home for violation of camp rules. $50.00 of the full fee is non-refundable in the event the camper does not attend. I certify that the applicant is in good physical condition to take part in the camp. In addition, I grant the Steve Rodrigues Soccer Clinic and its agent my permission to seek emergency medical attention for this child if, in their judgment, such attention is warranted and I am not immediately available to grant such permission. I, furthermore, certify that the above mentioned child is covered by medical insurance by:

_____
Insurance Company Policy #

_____
Signature of Parent or Guardian Date