

SUNBLAZER SOCCER CAMP 2019

www.sksoccer.org

AGES 4-18 BOYS/GIRLS {Individual/Team Camp}

June 10-Aug 16 /10 Weeks

Circle Sessions Attending

1-June 10-14 2-June 17-21 3-June 24-June 28 4-July 1-5 5-July 8-12 6-July 15-19 7-July 22-26
8- July 29- Aug 2 9-Aug 5-9 10-Aug 12-16

LOCATION:Indian Hammocks Park 11035 SW 84ST Miami, Fl, 33173

FULL DAY: \$160.00/WK 9am-3pm ages 8-18 Mon-Fri HALF DAY: \$90/WK 9am-12pm ages 4-7 Mon-Fri

Discounts: Siblings/Teams of 9 or more 10% off regular price (*only 1 Discount per camper applies*)

***Registration must be accompanied by payment**

In consideration of the acceptance by sponsors of my entry in the Sunblazer Camp, I, the undersigned, Intending to be legally bound for myself, my heirs, executor, administrators and assignees, do hereby waive, release and forever discharge the sponsors of this event including Sunblazer Soccer Inc, Sunblazer Camp, F.Y.S.A. and any governing body or political subdivision of Florida, Miami Dade County Parks, South Kendall Sunblazer Soccer Club inc. and its employees all sponsors and producers of this event, their agents representatives, successors, assignees from all liabilities, actions, claims, demands, costs and expenses, which I may now or in the future have against them or any of them arising put of or in any way connected to my participation in or the operation of any event in route to or from the event included but not limited to any alleged negligence or other action or inaction of the above named parties .

Name _____

First Name

Last Name

Address _____

City/State/Zipcode _____

Age _____ Grade(2015-2016) _____ Birthdate _____

Positions Played _____ Circle Sessions Attending 1 2 3 4 5 6 7 8 9 10

Parents Name _____

Home Phone _____ Cel Phone _____

Emergency Contact _____ Phone _____

E-Mail _____

I hereby give my son/daughter permission to attend Sunblazer Camp and for a qualified, athletic trainer/or hospital emergency room to administer necessary health care in the case of an accident and/or emergency. In addition I acknowledge that I have read and understand all information in this waiver

Parent/Guardian Signature

Limited space available.

***Make payments via PayPal on website page once payment is complete submit this paper to sunblazerinfo@gmail.com**

For further information contact us by E-mail at sunblazerinfo@gmail.com or call 786-333-3002