



## *The University of Memphis 2009 Youth Soccer Camp*

The University of Memphis Soccer Program will conduct its annual Youth Soccer Camp for boy's and girl's ages of 5 to 14 on Monday, June 1<sup>st</sup> – 5<sup>th</sup> and June 8<sup>th</sup> – 12<sup>th</sup> from 9am to 12pm. This camp will utilize the games skills to focus on player development; with sessions consisting of passing, receiving, dribbling, shooting, and heading. Whether your son or daughter is a beginner or an accomplished player, this camp is designed to make them a better player. We will group the campers in accordance with age and ability as the week progresses. The camp will consist of technical sessions, along with tactical and small sided games.

### **CAMP LOCATION**

The University of Memphis 2009 Youth Soccer Camp will be conducted at The University of Memphis South Campus Athletic Facility, which houses both outdoor and indoor facilities. This includes an indoor turf room, changing room facilities, and training room facilities

### **CAMP FEES**

The fee for The University of Memphis Youth Soccer Camp will be \$89.00 per child, or \$79.00 for siblings or groups of 10. The camp fee will also include a camp T-shirt.

### **CAMP ENROLLMENT**

To enroll in the Youth Soccer Camp, download and complete the information and return it to:

The University of Memphis  
Youth Soccer Camp – Nick Glaser  
207 Athletic Office Building  
Memphis, Tennessee, 38152-3730

The camp is based on a “first come first served” policy. Once accepted you will receive an acknowledgement by e-mail with further details and the daily schedule.

### **CAMP STAFF**

Our camp staff has been comprised by our University of Memphis Coaching Staff, other local college coaches, and our men's and women's players.





*The University of Memphis  
2009 Youth Soccer Camp  
Application*

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Fax #: \_\_\_\_\_

E-mail: \_\_\_\_\_

Age: \_\_\_\_\_ DOB: \_\_\_\_\_ Club Team: \_\_\_\_\_

Gender: \_\_\_\_\_

Guardian/Parental Signature: \_\_\_\_\_

Camp Week: Week 1  Week 2

T-shirt Size: (Please circle) Youth S M L or Adult S M L

Make Check or money order to: (89.00 Fee or 79.00 Fee)

The University of Memphis  
Youth Soccer Camp – Richie Grant

Mail application and medical waiver to:  
Youth Soccer Camp  
Nick Glaser  
207 Athletic Office Building  
Memphis, Tennessee 38152-3730



[www.gotigersgo.com](http://www.gotigersgo.com)



## ***MEDICAL INFORMATION***

**Please list any allergies or disabilities applicant has:**

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**Emergency Contact Information:**

**Name & Contact #:** \_\_\_\_\_

**Name & Contact #:** \_\_\_\_\_

**Name & Contact #:** \_\_\_\_\_

**Please list any medication currently taking:**

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**(If applicant is taking medication at time of camp please notify on arrival)**

**I, the undersigned parent or guardian, do hereby authorize the athletic trainer of coaching staff at the University of Memphis Player Development Camp to secure any and all medical treatment in the event that I cannot be contacted. I further authorize any attending physician to render any and all medical care which he/she may deem necessary.**

**I release The University of Memphis Player Development Camp, and all their affiliated entities from any and all liability, claims, demands, and causes of action for Personal injury or loss suffered by my child in connection with participation in this Camp.**

**I, the undersigned parent of guardian, also certify that my child is physically fit to attend and participate in The University of Memphis elite Soccer Camp.**

**Parent or Guardian Print Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_



Parent of Guardian Sign Name: \_\_\_\_\_ Date: \_\_\_\_\_

