

# Parental Consent

I certify that my child is in excellent health and may participate in the strenuous physical activity associated with soccer. I agree to hold Ohio University, its servants, agents, and employees harmless from any and all claims of injuries sustained by my child during his/her participation in the clinic. Permission is hereby granted to Ohio University for my child to receive emergency medical treatment if needed. I certify that there are no limits to my child's participation except as stated in writing and included with the application.

\_\_\_\_\_  
(signature of parent or legal guardian)

**\*\*Form will be returned without signature above.\*\***

## Medical Information

SS# \_\_\_\_\_

Physician \_\_\_\_\_

Insurance Co. \_\_\_\_\_

Policy # \_\_\_\_\_

Please note any medical conditions about which our staff and trainer should be aware:

\_\_\_\_\_  
\_\_\_\_\_



Ohio Soccer  
110 Convocation Ctr.  
Athens, OH 45701



2009

# Ohio University Extended Soccer Clinics



Summer Clinic

July 13-16, 2009 (Mon-Thurs)  
9:00 am - 3:00 pm

Director:

**Jim Welch, Associate Head Soccer Coach**

# Clinic Philosophy

This clinic is designed to promote learning through a fun and challenging curriculum. Participants will have the opportunity to train with and learn from college players, under the direction of college coaches. The week will be an opportunity to meet new challenges and will provide each player with the knowledge and skill necessary to improve individual and team play. This will be the eighth year of the clinic and the third year under the direction of Jim Welch.

## Clinic Curriculum (Full Day)

|            |                        |
|------------|------------------------|
| 9:00 am    | Warm-up                |
| 9:20 am    | Group / Skill Sessions |
| 11:30 am   | Games                  |
| 12:00 noon | Lunch                  |
| 1:00 pm    | Demonstrations         |
| 2:30 pm    | Games / Competitions   |
| 3:00 pm    | Depart                 |

**OHIO  
SOCCER**

**MAC CHAMPS 1998, 2001, 2004**

## Clinic Location

Ohio University is located in Athens, OH. The clinic will utilize Chessa Soccer Field and the university's turf facility, Pruitt Field, both located on Shafer St. Pruitt Field will serve as the pick-up/drop-off location for campers each day.

## Equipment

Attendees MUST bring their own soccer ball and shin guards. We suggest wearing cleats. Participants should also have sneakers available so that sessions can be moved indoors if necessary. Full day campers should bring a lunch and ALL are strongly encouraged to wear sunscreen and to bring plenty of water.

## CAMP DIRECTORS & STAFF

### Director: Jim Welch

Welch recently completed his sixth year at Ohio and his second season as the program's associate head coach. Prior to his move to Athens, Welch spent time as the men's assistant at Marquette University, played in the MLS for the Los Angeles Galaxy, and was a member of the U-18 and U-20 U.S. National Team pools. Welch holds a USSF "B" coaching license.

### Assistant Director: Stacy Strauss

Coach Strauss recently completed her ninth year as head soccer coach at Ohio University. During this time, she has led the team to six winning seasons and two seasons that ended in MAC Championships. In 2002, Strauss also led the team to the MAC Tournament final. She is a former assistant at Dartmouth College and the University of Rhode Island. Strauss holds an NSCAA Premier Coaching Diploma.

### Assistant Director: Amy Switzer

After spending four years as a member of the Bobcat soccer squad and helping the program earn its league-best third MAC Championship, Amy Switzer accepted a position as an assistant soccer coach for the College of Charleston (SC). In 2008, Switzer helped the Cougars to a 12-5-3 record. Switzer holds an NSCAA Advanced National Coaching Diploma.

# Application

| Clinic Sessions   | Time         | Price        |
|---|--------------|--------------|
| <input type="checkbox"/> Summer Half Day Clinic<br>July 13 – July 16; 6-14 yrs  | 9 am - 12 pm | \$110.00     |
| <input type="checkbox"/> Summer Full Day Clinic<br>July 13 – July 16; 10-14 yrs | 9 am - 3 pm  | \$210.00     |
|   |              | Total: _____ |

\_\_\_\_\_  
Name

\_\_\_\_\_  
Age, Birth Date & Grade

\_\_\_\_\_  
Address (Inc. Zip Code)

\_\_\_\_\_  
Home Phone

\_\_\_\_\_  
Parent Name

\_\_\_\_\_  
Parent Email Address

\_\_\_\_\_  
Emergency Phone

\_\_\_\_\_  
Goalkeeper / Field Player

**Please sign the form on the opposite side of this page and make checks payable to: Ohio Soccer**

A deposit of \$50 is due with the application in order to hold a space for the week. The balance is due on the first day of camp. Interested individuals are encouraged to sign up early, as enrollment is limited.

**Return application to:  
Ohio Soccer  
110 Convocation Center  
Athens, OH 45701  
For more information call:  
740-597-1759**



Note: To secure a full refund, all cancellations must be received in writing 15 days prior to the start of the clinic. Cancellations made within 14 days of the clinic will receive a 50% refund. No refunds will be awarded to campers that are "no shows."