



FEATURES

- Train with Siena College Coaching Staff
- Current and former Siena College players on staff
- Technical, tactical, and functional training
- Goalkeeper training
- Sessions held on grass game field and/or new turf stadium
- Full-time trainer on-site
- Siena College clinic t-shirt
- College recruiting Q&A
- Campus tour
- Snacks and Refreshments will be provided between sessions



CLINIC PHILOSOPHY

The Siena College Girls' Soccer Clinic is for the female soccer player who wants to improve both her knowledge and skills of the game. Players will be challenged to transfer the skills and knowledge they learn during morning training sessions to full sided afternoon matches. This clinic is for players who desire high quality soccer training that is needed to excel in club, high school, and college soccer levels.



DIRECTIONS TO CAMPUS

From the North– Take Exit 5 (NY 155) off the Northway (I-87). Left on NY 155 to US 9. Right on US 9 for two miles. Turn east off of US 9 onto Spring Street Road. Take a left onto Turchi Road. Soccer fields and parking will be on your right.

From the South – Take Exit 23 (I-787) off the New York Thruway. Follow I-787 to I-90 West. Take Exit 6 (US 9 North to Loudonville, first exit off I-90). Follow US 9 north approximately two miles. Turn east off of US 9 onto Spring Street Road. Take a left onto Turchi Road. Soccer fields and parking will be on your right.

From the East off the Massachusetts Turnpike – Take the New York Thruway to Exit B-1 (I-90 West). Follow I-90 to Exit 6 (US 9 North to Loudonville). Follow US 9 north approximately two miles. Turn east off of US 9 onto Spring Street Road. Take a left onto Turchi Road. Soccer fields and parking will be on your right.

From the West – Take Exit 24 (Northway I-87) off the New York Thruway. Follow I-87 North to Exit 5 (NY 155). Left on US 155 to US 9. Right on US 9 for two miles. Turn east off of US 9 onto Spring Street Road. Take a left onto Turchi Road. Soccer fields and parking will be on your right.

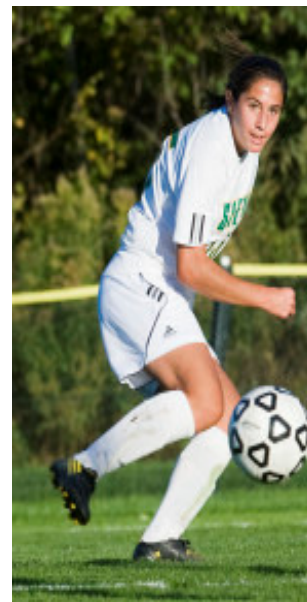


QUESTIONS

If you have any further questions or concerns please feel free to contact:

Steve Karbowski-Director
 skarbowski@siena.edu
 (518) 782-6826

2012 Siena College Summer Clinic



Sat. August 4, 2012

Girls Grades 9-12



CLINIC INFORMATION

Date: Sat. Aug. 4, 2012

Time: 9am-2:30pm

**Who: Girls Entering
Grades 9-12**

Fee: \$100 per player



WHAT TO BRING

- Cleats
- Indoor/Turf Shoes
- Shin guards
- Soccer ball
- GK equipment (if necessary)
- Players should be prepared for all types of weather conditions!

**Please mark all equipment with your name.
Siena College is not responsible for lost items.**



DAILY SCHEDULE

- 8:30-9:00 Check in at Siena Turf Stadium
- 9:00-9:45 Technical Training
- 9:45-10:30 Small Sided/Zonal Games
- 10:30-11:30 Campus Tour
- 11:30-12:00 Technical Warm-up
- 12:00-1:30 Full Sided Scrimmages
- 1:30-2:30 Recruiting Seminar



RECRUITING SEMINAR

The recruiting seminar is optional, but players and parents are encouraged to attend. We will outline important steps in the recruiting process and have time for a Q&A period.



REGISTRATION FORM

Name: _____

Grade (Fall 2012) _____

Address: _____

City: _____

State: _____ Zip: _____

Parent/Guardian: _____

Phone: _____

Email: _____

(confirmation will be sent via email)

Health Insurance Company: _____

Policy Number _____

T-Shirt size: Adult S M L XL

Club Team Name _____

Position: (1) _____ (2) _____

Make check payable to: Siena College Women's Soccer
RETURN APPLICATION WITH CHECK TO:
Siena College Women's Soccer ATTN: Steve Karbowski
515 Loudon Rd.
Loudonville NY, 12211

I hereby authorize a representative of Siena College soccer to take my daughter to a physician or hospital should the need arise. This also assures Siena College, that my daughter is in good physical condition, and in good health to participate in the clinic. I also release Siena College Athletic Department, the Soccer Coaches, and all other workers from all rights and claims of damages, loss of property, or injuries that may be sustained during any involvement with the clinic activities.

Signature of Parent/Guardian

Emergency Contact (Name and Number)