

**CLINIC TUITION**

**\$75.00**

Full Tuition Due Upon Registration

Please make checks out to:  
*UMASS WOMEN'S SOCCER*

**APPLICATION**

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

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

City State Zip

Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

HS GPA: \_\_\_\_\_ Possible Major: \_\_\_\_\_

High School: \_\_\_\_\_

Email: \_\_\_\_\_

***CIRCLE the appropriate selection below:***

Class: Freshmen, Sophomore, Junior, Senior

Club Team: \_\_\_\_\_

Position: \_\_\_\_\_

**Mail to:**

Rebecca Capinera  
Assistant Women's Soccer Coach  
Boyden Building  
University of Massachusetts  
131 Commonwealth Ave  
Amherst, MA 01003-9253

Phone: 413-545-4097

Fax: 413-545-1404

Email: [rcapiner@admin.umass.edu](mailto:rcapiner@admin.umass.edu)

Directions: [www.UMassathletics.com](http://www.UMassathletics.com)



**2012 Schedule  
NCAA Division I  
Atlantic 10 Conference**

8/21/12	@Bryant University	3:30 PM
8/26/12	University of Albany	1:00 PM
8/31/12	Harvard University	1:00 PM
9/7/12	Wake Forest Tournament vs. Wake Forest	7:00 PM
9/9/12	Wake Forest Tournament vs. Virginia Tech	11:30 AM
9/14/12	@ Boston University	7:00 PM
9/16/12	New Hampshire	1:00 PM
9/20/12	@Brown University	7:00 PM
9/23/12	Siena College	1:00 PM
9/28/12	@ St. Joseph's University	7:00 PM
9/30/12	@ Temple University	1:00 PM
10/5/12	Richmond University	4:00 PM
10/7/12	George Washington University	1:00 PM
10/12/12	Dayton University	4:00 PM
10/14/12	Xavier University	1:00 PM
10/19/12	@ St. Bonaventure University	3:00 PM
10/21/12	@ Duquense University	1:00 PM
10/27/12	@ University of Rhode Island	7:00 PM



**SPRING CLINIC 2012**



**FRIDAY APRIL 6, 2012  
9:30 AM-4:00 PM**

**FUTURE MINUTEWOMEN  
HIGH SCHOOL GIRLS  
FRESHMAN-SENIORS**

## MINUTEWOMEN CLINIC

9:15 AM Check-In @ McGuirk Stadium  
9:30 AM Field Session  
12:00 Lunch  
1:00 PM Tour  
2:30 PM Recruiting Presentation  
3:45 Closing Statements  
4:00 Check Out

## PHILOSOPHY

The Massachusetts Future Player Soccer Clinic is designed for young female soccer players that are interested in attending UMass Amherst. The clinic offers an informative tour of UMass, a valuable question and answer session and training sessions at Rudd Field. Parents are welcome to attend all events. Enrollment will be limited to 50 participants.

## CLINIC INFORMATION

LOCATION: Rudd Soccer Complex  
University of Massachusetts  
Amherst, MA 01003-9253

CHECK-IN LOCATION: Boyden Gym  
131 Commonwealth Ave  
Amherst, MA 01003-9253

LUNCH: Is included in fee.

DIRECTIONS: [www.umassathletics.com](http://www.umassathletics.com)

INSURANCE: Athletes must provide their own insurance.  
The clinic has an athletic trainer on duty at all times.

REFUNDS: Full Refund up to 72 hours prior to camp

EQUIPMENT: Shorts, soccer shoes, sneakers, shin guards

WHAT TO BRING: Great Attitudes and Questions!



## 2011 IN REVIEW

The UMASS Women's Soccer program finished the year at 14-5-2. Within the Atlantic 10 Conference, the team finished in 2<sup>nd</sup> place losing in the tournament final to #27 Dayton. Overall, the program ended the year ranked at #46 out of 322 teams in the NCAA RPI, with wins over #20 Boston University and #35 La Salle.

## PROGRAM HISTORY

15 Appearances in NCAA Tournament  
6 Appearances in NCAA Final Four  
5 Atlantic-10 Championships  
40 All-Americans  
60 All-New England honorees  
60 All-Atlantic Region Selections  
8 Atlantic 10 Players of the Year  
4 Atlantic 10 Tournament MVP's  
NCAA Tournament MVP  
Missouri Athletic Club/Adidas GK of the Year  
National Player of the Year-Hermann Trophy  
3 United States National Team Players  
4 Players in the WUSA

Please indicate the following information below.  
No camp application is complete without this information.

### Health Insurance

Company: \_\_\_\_\_

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

### Physician Information

Doctor: \_\_\_\_\_

Phone #: \_\_\_\_\_

**In case of an emergency**, it is necessary for us to have both home and work telephone numbers for the camper's parent/guardian.

Home #: \_\_\_\_\_

Work #: \_\_\_\_\_

Camper's Name: \_\_\_\_\_

I (please print) \_\_\_\_\_

Parent/guardian of above camper, hereby authorizes the staff of the University of Massachusetts to act for me according to their best judgement in any emergency requiring medical attention for the above camper. I hereby waive and release the University, its corporators, employees, students, and agents from any and all costs, liability and expense for any personal injuries or illness in any way related to participation in the clinic program. I have no knowledge of any physical impairment that would be affected by the above camper's participation in the camp program, as outlined in this brochure. I also understand the Academy retains the right to use, for publicity and advertising purposes, photographs of campers participating in the camp program.

\_\_\_\_\_  
*Parent/Guardian Signature*

Date: \_\_\_\_\_