



Menlo College Elite Soccer ID Camp

This training camp is designed to expose players to college level coaching and help prepare them for collegiate level soccer. The camp will allow participants to have technical and tactical aspects of their game evaluated. Coaching staff will conduct carefully designed sessions to improve both individual and team play.

Who: College Bound high school athletes ages 15 and up

When : November 7th, 2010

Where: Wunderlich Field, Menlo College Campus, 1000 El Camino Real, Atherton, CA

Times: 9:45 am Registration - 10:00 am - 5:00 pm clinic

Cost : \$85 per participant (includes, lunch, T-shirt, and Under Armor Sackpack)

Directed By: Head Women’s Soccer Coach Scott Myers
Assistant Coach Sherman Trigg

Accommodation: Hilton Garden Inn
650.316.2100
Ask for Garret Ridder

Payment: Send Checks Payable to:
Menlo College Women’s Soccer
1000 El Camino Real
Atherton, CA 94027

For More Information: Contact Sherman Trigg
650.543.3815
strigg@menlo.edu



***Please mail registration, liability waiver, and payment to:
Menlo College Attn: Women’s Soccer 1000 El Camino Real Atherton, CA 94027

Name: _____ Age: ____ Email address: _____

Liability Waiver

I hereby authorize the staff of the Menlo College soccer program and athletic department to act for me to their best judgment in an emergency requiring medical attention, and I hereby waive and release Menlo College, the athletic department and athletic personnel from any and all liability for the injuries or illnesses incurred while at the camp. I have no knowledge of any physical impairment that would be affected by the below named campers participation in the camp program. I understand that I am required to maintain and carry accidental medical coverage for the child listed on this application, and I verify that the coverage information herewith is accurate and true. I understand the camp is not responsible for lost or stolen articles. I also understand the camp retains the right to use for publicity and advertising purposes photographs of campers at camp.

Parent/ Guardian Signature _____ **Date** _____
Camper Name: _____
Parent(s) Name(s): _____
Address: _____
City: _____ **Zip:** _____
Home Phone: _____
Emergency contact: _____
Emergency Phone: _____

Medical Carrier Policy # _____
Charge My (circle one): Visa/MC/AmEx
Card Holder Name: _____
Account Number: _____
Expiration Date: _____
Cardholder Signature: _____
Date Signed: _____