

# ROCKY MOUNTAIN SOCCER CAMP



Quality - Integrity - Tradition  
Mark Perdew - Director

Presents

# WIND RIVER Soccer Camp



**LANDER, WY - JUNE 9-11, 2020 - Boys & Girls - Ages 6-14**

*12 Hours of High Level Training, Skills, Games, Scrimmages, Contests, Ball Machine, Radar Gun, Rebound Nets, Video Analysis, Professional Coaches and MORE!*

**\$200 PER PLAYER      Kristopher George Soccer Complex at Lander Valley HS**

**Tue, Wed, Thu      9:00 AM - 11:00 AM and 12:00-2:00 PM Each Day!**

**TRAINING and ACTIVITIES are CUSTOMIZED for each SPECIFIC AGE GROUP and ABILITY LEVEL!**

The RMSC Programs concentrate mainly on Skill Development in a Fun, Creative and Educational Environment, and Sessions can be Tailored to the players in the camp. The Innovative Methods put forth by the RMSC include Skill Training Games, Specialized Training Areas, Small-Sided Scrimmages, Video Analysis, Tactical Foundations and the RMSC Soccer Skill Evaluations. These cutting-edge concepts allow for easy understanding and quick improvement.

**HIGH LEVEL SOCCER CAMP INSTRUCTION!**

**HIGH QUALITY SOCCER CAMP EXPERIENCE!**

**20 Player Minimum  
120 Player Maximum**

*Come and Join the FUN!*

**Learn More About the RMSC at:  
[rockymountainsoccercamp.com](http://rockymountainsoccercamp.com)**

**REGISTER ON-LINE at: <https://rockymountainsoccercamp.registration.payscape.com/>**

**CALL 720-394-5257 or E-Mail [rockymtnsoccercamp@juno.com](mailto:rockymtnsoccercamp@juno.com) for MORE INFORMATION!**

# 2020 ROCKY MOUNTAIN SOCCER CAMP APPLICATION

## WIND RIVER SOCCER CAMP - JUNE 9-11, 2020 \$200 Per Player Boys & Girls Ages 6-14

NAME \_\_\_\_\_ AGE (As of Camp Date) \_\_\_\_\_ M/F \_\_\_\_\_ BIRTHDAY \_\_\_/\_\_\_/\_\_\_ TEAM/DIVISION \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
E-MAIL \_\_\_\_\_

Please indicate any known ALLERGIES, DISABILITIES, or MEDICAL PROBLEMS: \_\_\_\_\_  
INSURANCE COMPANY \_\_\_\_\_ PHONE \_\_\_\_\_ POLICY or GROUP NUMBER \_\_\_\_\_  
PARENT/GUARDIAN \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ HOME PHONE \_\_\_\_\_ ALT. PHONE \_\_\_\_\_  
EMERGENCY CONTACT \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ HOME PHONE \_\_\_\_\_ ALT. PHONE \_\_\_\_\_

### RELEASE FORM

In consideration of being permitted to take part in the activity set forth herein, I expressly agree as follows: I hereby acknowledge that the activity set forth herein contains dangers and risks and may result in injury to the participant. I hereby assume all risks of personal injury or death and property damage from any causes whatsoever arising while my child is participating in such activity. My child is in good health and is physically able to participate in said activity. I hereby agree to unconditionally waive and release the ROCKY MOUNTAIN SOCCER CAMPS, INC., their officers, employees, agents, servants and all representatives and sponsors from any injury that my child may sustain or any damage that may be caused to my child's property in connection with any ROCKY MOUNTAIN SOCCER CAMPS, INC. activity. I also agree to indemnify and forever hold harmless the ROCKY MOUNTAIN SOCCER CAMPS, INC. for any claims arising out of injury or death to my child, other than gross negligence or willful misconduct of the ROCKY MOUNTAIN SOCCER CAMPS, INC. I also authorize and consent to any emergency X-ray examination, medical diagnosis or treatment and hospital care and on the advice of any physician licensed to practice in the state of Colorado or in the United States of America.

I, furthermore, hereby give my permission to the ROCKY MOUNTAIN SOCCER CAMPS, INC. to use my child's name, likeness, image and photograph for any camp promotional or advertising purposes including, but not limited to, brochures, flyers, internet web sites, and videos.

Parent or guardian signed will be contacted and will be responsible for the health insurance of their child.

**PARENT/GUARDIAN SIGNATURE** \_\_\_\_\_

**REGISTER ON-LINE AT: <https://rockymountainsoccercamp.registration.payscape.com/>**

**Or COMPLETE the APPLICATION FORM, SIGN the RELEASE FORM, and MAIL with PAYMENT to:**

**Rocky Mountain Soccer Camp P.O. Box 47 Victor, CO 80860**

**REGISTRATION DEADLINE!! SATURDAY, JUNE 6, 2020**

(For Office Use Only)

|                |                     |            |                 |                  |
|----------------|---------------------|------------|-----------------|------------------|
| CHECK #1 _____ | DATE RECEIVED _____ | NAME _____ | AMOUNT \$ _____ | BALANCE \$ _____ |
| CHECK #2 _____ | DATE RECEIVED _____ | NAME _____ | AMOUNT \$ _____ | BALANCE \$ _____ |