SOCCER, ETC. INTERNATIONAL
OCCIDENTAL COLLEGE WINTER CAMP 2019
Please Complete & Return Together With Your Check To:
Soccer, Etc. International, 20541 Galloway Drive, Santa Clarita, CA, 91350
Phone: (661)600-3610
Website: www.socceretc.org
E-Mail: cnicolaou@sbcglobal.net or cmcfeely@oxy.edu

Please complete an application form for each player you wish to register!

Player's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Home: _____ Work: _____ Cell: _____

Male: _____ Female: _____ Date Of Birth: _____

Parent/Guardian's Name: _____

E-Mail Address (Please Print Clearly): _____

T-Shirt Size: Youth L: _____ Adult S: _____ Adult M: _____ Adult L: _____ Adult XL: _____

I would like to enroll my child in the following Occidental College Camp Session:

Occidental College Winter Camp: (2, 3 & 4 January, 2020) Cost $155.00 _____

Position Played: _____ Need A Soccer Ball? **Cost:** $ 25-00. Size: 3 _____ 4 _____ 5 _____

Please make your check payable to SOCCER, ETC.

I hereby authorize the staff of SOCCER, ETC. INTERNATIONAL to act for me according to their best judgment in any emergency requiring medical attention, and I hereby waive and release SOCCER, ETC. INTERNATIONAL and its employees from any and all liability for any injury or illness caused while at camp. I have no knowledge of any physical impairment that would be affected by the above-named camper's participation in the program. I also understand that SOCCER, ETC. INTERNATIONAL retains the right to use for publicity or advertising purposes, any and all photos taken of campers at camp.

_____ _____ / _____ / _____
Parent/Guardian's Signature Date

Emergency Phone # & Contact: _____ _____
Name Of Contact Phone Number