

OAKVILLE HIGH SCHOOL >> BOY'S HIGH SCHOOL SOCCER CAMP



Instruction provided by the Oakville Soccer Coaching Staff

When: June 26th to June 29TH 2017—6:00 to 8:00 P.M.

Where: OHS STADIUM FIELD—

Who: All boys entering Grades {9-10-11- 12}

<>The purpose of the Oakville High School Boys Soccer Camp is to enhance the development of players through a combination of technical training, small group and large group tactical training.

<>Players should meet at the OHS STADIUM FIELD with their own gear—ball, shin guards, water, and towel. If you have any questions, please call Oakville Athletic Office at 467-7202—or contact Coach Robben at drobben@mehlvilleschooldistrict.net

**Please return this information form with— the signed camp release form to— Oakville Athletics—
5557 Milburn Rd.—Saint Louis, MO 63129**

Include a check for \$85 made payable to Oakville Athletics by June 21, 2017—if possible. 'Walk-ups' are welcome the first night of camp if necessary. Discounts are available for families with 'multiple campers'—contact Coach Robben drobben@mehlvilleschooldistrict.net

Name: _____

Address: _____

Phone: _____ e-mail _____

Grade in fall '2017': _____

Previous School: _____

Parent/Guardian _____

Phone: _____ e-mail _____

Emergency Contact Name _____

Phone: _____ Date: _____

CAMP RELEASE FORM

This to certify that

(Camper's name and date)

is physically fit to participate in all activities at the Oakville High School Soccer Camp and has had a recent physical exam.

Oakville Soccer Camp Release and Waiver of Liability:

I understand that playing or participating in the above sport may be a potentially dangerous activity with the risk of injury. I understand that in any contact sport, such as the sport involved at this camp, an athletic participant can be seriously hurt.

I am aware that the dangers and risk of my child/ward playing or participating in the above sport include, but are not limited to, falls, contact or collisions with other participants, equipment and facilities and the effects of weather, including heat and humidity. I understand that my child/ward may incur a serious injury including paralysis or death, because of the dangers and risks associated with the above sport(s). I have certified to the coach, by my signature below, that my child is in good health and physical condition and sufficiently able to participate in the camp. I understand that the coach recommends that my child/ward obtain a physical examination to identify any physical condition or limitation of which I might not be aware that could affect her participation in the above named sport(s). I have advised the coach of any limitations on my child/ward's activities for medical reasons.

Knowing and having been informed of the potential dangers and risks associated with playing the above sport, and in consideration of my child/ward being allowed to participate in the camp, I hereby agree on behalf of myself, my family members and my child/ward to assume all such risks and further, to waive, release, discharge and hold harmless Mehlville School District and their respective employees, coaches, camp instructors and volunteers from any and all liability actions, causes of actions, claims or demands for personal injury, death or property damage of any kind or nature, and any other claim whatsoever arising out of, or in any way connected with my child/ward playing and participating in the above sport and camp. This Release and Waiver extends to all claims of every kind or nature whatsoever, foreseen or unforeseen, known or unknown. The terms hereof shall serve as an assumption of risk, release and waiver for myself, my family, my child/ward and our heirs, executors, administrators, guardians or anyone else who might assert a claim on our behalf.

I hereby consent to permit the coach and staff working at the camp to provide emergency first-aid or medical treatment for my child/ward according to their best judgment, in the event he/she suffers an injury or illness while participating in the camp or on the camp premises.

Signature of Parent or Legal Guardian _____

Date _____