

Register NOW for the 16th Annual **CC SELECT SOCCER CAMP**



- **WHO CAN SIGN UP:** Age Groups for Boys & Girls:
 1. YOUTH STARS – players **entering** grades 1st – 6th
 2. ADVANCED TEAM – players **entering** grades 7th – 9th
 - **DATES:** Th (6/27), Fri (6/28), Mon (7/1), Tues (7/2)
 - **TIMES:** 8:30 – 11:30am
 - **LOCATION:** Testa Park (Starr Road)
 - **COST:** \$80
 – Registration includes: a T-shirt, water bottle and soccer ball!
 – Please make checks payable “CC Select Soccer”
- * Limited financial assistance is available on a 1st come 1st serve basis
 ** Full refunds given until 6/10. After 6/10 only 50% refunds will be provided.

Sponsored by: CCYSA
www.ccysasoccer.org

What to Bring to Camp:

- ✓ Shin Guards
- ✓ Water Bottle (Filled)
- ✓ Positive Attitude
- ✓ 100% Effort

MAY SPECIAL
WIN \$100 CASH!!!
 Refer a friend. Make sure your name in the appropriate box. You will automatically be entered to win!

REGISTRATION: Please register by **MONDAY JUNE 10th**

1. Register online using this link: tinyurl.com/y2knazqu, pay online at: www.paypal.me/CCSelect
OR
2. Mail to: Iona Ryon, Cortland School District, Valley View Drive, Cortland, NY 13045

QUESTIONS: Call Iona Ryon 758-4180 OR Email cselectsoccer@gmail.com.



CC Select Soccer Camp Registration Form

Deadline is Friday, **6/10/19** * Please enclose payment (Payable to CC Select)

REFERRED BY (NAME): _____

Player's Name: _____ Age: _____ DOB: _____

Shirt Size: -YS, -YM, -YL, -AS, -AM, -AL, -XL Grade (as of 9/19): _____

Parent Name(s): _____ Phone: _____

Address: _____ City: _____

Email Address: _____

Emergency Contact Person: _____ Phone: _____

Release of Liability

In consideration of participation I the undersigned intending to be legally bound for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against the all coaches and sponsors of this program, their representatives and successors for any and all injuries suffered by me or my child. I attest and verify that my child is physically fit and in good physical condition that has been verified by a licensed medical doctor. Further, I hereby grant full permission for the use any photographs, videotapes, motion pictures, recording or any other record of this event for any legitimate purpose.

Terms & Conditions

Payment is due upon registration. Full refunds will be given until the registration deadline (6/10/19). A 50% refund will be given after June 10. This camp is an opportunity to provide your child(ren) with a fun and engaging soccer experience. We reserve the right to suspend or expel participants if behavior becomes an issue.

Parent Signature: _____ Date: _____