

2018 EMSSC/ UTHS TEAM CAMP

Over 25 Years of 'Coaching
Excellence' with a
commitment to the
development of Youth
Soccer.

Team Camp is an essential
part of every soccer
player's preseason
preparation. Boys' & Girls'
aged 8 through 18 are
strongly encouraged to
attend Team Camp



Goal Keeping, Tactics,
Teamwork Positional
Awareness, Physical & Mental
attributes as well as Skill
concepts are covered by an
experienced team of coaching
staff.

Visit: www.emssc.org

PAYMENT OPTIONS

All checks/Money Orders are payable to:
PHIL WEAVER

Mail payment to:
COACH PHIL WEAVER
19 KNOLL COURT
ROCK ISLAND, IL 61201

Players have the option to REGISTER and
PAY online at www.emssc.org
Follow links to camp registration on the
EMSSC Web Site

PAYMENT FEE & DEADLINES:
\$100.00 if paid on or before July 1, 2018
\$110 on or after July 1, 2018
10% family discount when registering
two, or more players

NO REFUNDS AFTER FRIDAY, JULY 20th

(Proof of Medical Waiver Only)
For more detail's & information:
Email: weavepr@aol.com

Call (309) 235-9891
Or visit the EMSSC Web Site:
www.emssc.org

2018 EMSSC/ UTHS TEAM CAMP

U'8 thru U'19 Boy's & Girls'



Mon, July 23rd thru Fri, July 27th
5:30 p.m. thru 8:00 p. m.
JACOBS PARK, EAST MOLINE, IL



TEAM CAMP 2018

FEE: 100.00 dollars

**Directed by Phil Weaver – UTHS
Head Soccer Coach**

EQUIPMENT:

SHIN GUARDS are MANDATORY and must be worn at all times. Participants must bring their own SOCCER BALL clearly marked with their initials.

Player's must wear appropriate SOCCER SHOES, SHORTS & SOCKS & should bring one light & one dark T-SHIRT. A warm HOODY & SWEAT PANTS are advised. WATER BOTTLE, LIGHT SNACK.



Whether you're a Goal Keeper, or an outfield player, this Team Camp is definitely for you.

COACHING STAFF TO INCLUDE BUT NOT LIMITED TO:

TONY DAVILA – UTHS JV Coach

ERIC CASSLING- UTHS FR Girl's Coach

MARCOS MORENO – UTHS FR Boy's Coach

EMILY ROBINSON - Loras College, IA

LAURA BURRILL – Illinois State University, EMSSC GK Director

SCHEDULE:

Monday thru Friday Arrival 5:15 p.m.

Start: 5:30 p.m. End Time: 8:00 p.m.

EMSSC TEAM CAMP REGISTRATION:

FEE: \$100.00

NAME.....

AGE.....

ADDRESS.....

CITY.....

STATE.....

ZIP.....

EMERGENCY CONTACT.....

PHONE.....

T-SHIRT – CIRCLE ONE

Youth Large AS AM AL AXL

PARENT AUTHORIZATION & LIABILITY WAIVER:

I hereby authorize the Directors' & Staff of the EMSSC Team Camp 2018 to act for me, according to their best judgement in an emergency requiring medical attention. I hereby release the Team Camp, their employee's & associates from any liability for any injuries sustained whilst attending the 2018 EMSSC Team Camp. I certify that my son/daughter is medically fit to participate in the 2018 Team Soccer Camp.

List Allergies and Medications:

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Parent Signature.....

Date.....