Weston Soccer Community
June 27-July 1 Code: 64068832 Morehouse Field, 478 Newtown Turnpike, Weston 9am-12pm (7-14 yrs) $195
or 9am-3pm (7-14 yrs) $225
or 9am-11am (4-6 yrs) $175
Make Checks Payable to UKISC
UK International Soccer Camps 888-857-6222
PO Box 1838, Redlands, CA 92373
antony.howard@uksocca.com

Come and be part of 'The Best Possible Soccer Experience'

Player 1 Name: _____ DOB: _____ M ◯ F ◯

Player 2 Name: _____ DOB: _____ M ◯ F ◯

Medical Info/Allergies: _____

Parent / Guardian Name: _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

Contact Phone Number: _____ Emergency Number: _____

CAMP DETAILS

Name of Hosting Organization: _____ Camp Code: _____ Date of Camp: _____

Camp Location: _____ Session Time: _____ Session Price: $_____

Session Time: _____ Session Price: $_____

CAMP ACCESSORIES

Camp Shirt (Circle): YS ◯ YM ◯ YL ◯ AS ◯ AM ◯ AL ◯ $ FREE

Soccer Ball ($15 if not included in camp): Size 3 (4-7yrs) ◯ Size 4 (8-11yrs) ◯ Size 5 (12+yrs) ◯ $_____

Shinguards ($10): XS (4-7yrs) ◯ S (8-10yrs) ◯ M (11-13yrs) ◯ L (14+yrs) ◯ $_____

Waterbottle ($5): ◯ $_____

Clinic ($30): Goalkeeper (8+ yrs) ◯ OR Striker (8+ yrs) ◯ $_____

Family Discount (Deduct $5 for each additional sibling from your total) - $_____

Add $10 Admin fee if registering less than 10 days prior to camp $_____

TOTAL AMOUNT ENCLOSED $_____

Check ◯ CK# _____ Mst ◯ Visa ◯ Dis ◯

CC#: _____ Exp: _____ Security Code: _____

HOSTING A UK INTERNATIONAL COACH (Optional) May not be available at all camps, check with coordinator

◯ I am interested in hosting a UK Coach and receiving a FREE week long half day scholarship

◯ I am interested in the Coach Incentive Program

I certify that my child (ren) is in excellent health and may participate in strenuous physical activities including soccer. I agree to defend and hold UK International Soccer Camps, it servants, agents and/or employees and contractors harmless from any and all claims for injuries sustained by my child during his or her participation in the camp. Permission is hereby granted to UK International Soccer Camps to use photographs and any video footage of the players in any promotional materials without compensation, plus all mailing and e-mailing addresses for any communications and/or programs. Permission is granted for my child to receive emergency medical treatment, if needed, and I certify that there are no limits to my child's participation except as stated in writing and included with this application.

No refund for cancellation within 14 days of the camp start date. Children who leave during the program due to injury or illness will receive a prorated refund assuming doctors verification is provided. A $25 Admin fee will be required on any and all refunds. Should inclement weather or acts of God affect the program any loss hours will be made up later in the camp week. If this is not possible, refunds will not be issued. Camp equipment cannot be guaranteed for players who register less than 10 days prior to camp. All purchases or transactions prior to or after a promotional offer can not be exchanged for retroactive benefit.

Parent / Guardians Signature: Date: