

Medical Information Form

Medical Insurance Co: _____

Policy Holder: _____

Policy Number: _____

Emergency Contact Information

Name: _____

Relationship: _____

Phone Number: _____

Family Doctor: _____

Phone Number: _____

Known Allergies: _____

Asthma: _____

Diabetes: _____

Contact Lens: _____

List of Medications Currently Taking: _____

Injury/Illness Policy

An athletic trainer will be on duty to treat minor problems and ailments. For more serious issues, hospital facilities are nearby. However, all players must have their own medical insurance coverage. Campers will only be allowed to participate if the medical information form is completed and the registration form is signed by a parent or guardian. No registration fees can be refunded unless a physician's note is produced.

Photo Policy

Benedictine University uses photographs of camp participants to inform others of the many opportunities available in our community. We do not use name identification in our materials. However, if you do not wish to have your child's photograph taken, please inform Benedictine in writing prior to commencement of the camp.



BENEDICTINE UNIVERSITY SOCCER



SPRING BREAK SOCCER CAMP

Dates:

March 29 - April 2, 2010

For:

Boys and Girls
ages 6 - 14

Camp Features:

- Five days of expert instruction
- Camp T-shirt and certificate
- Written evaluation
- 10 : 1 player-to-coach ratio
- Competitions, prizes and FUN!



Benedictine
University®

5700 College Road
Lisle, Illinois

Benedictine University Camp Directors



Robyn Serge

- Benedictine University Head Women's Coach
- Former Head Coach, Rockford College and Beloit College
- NSCAA National Coaching Diploma
- Assistant Coach, Chicago Red II, USL W-League



Rob Kettle

- Benedictine University Head Men's Coach
- Former Head Coach, California University
- US Soccer "A" Coaching License

Camp Staff

Camp coaches are handpicked and closely supervised by the directors. Some staff members will be selected from the men's and women's varsity squads at Benedictine.

Philosophy

We are dedicated to the education and development of soccer players. Our program is designed to meet the needs of, and also challenge, every camper. Small sided games are used to teach campers to make correct decisions and perform under pressure.

Spring Break Soccer Camp Information

Who Can Attend

Camps are open to boys and girls, ages 6-14. All levels of experience are welcome. Players are grouped by age and ability.

Camp Fee is \$150

Enrollment is limited to ensure small group instruction. **Book now to guarantee your place!**

Discounts (Only one discount applies)

- \$10 per player for members of the same family
- \$10 per player for previous Benedictine campers
- \$25 per player for the children of BU employees
- \$25 per player for eight or more members of the same team (team registrations must be mailed together in one envelope)

Registration Deadline

One week prior to start of camp. Enrollees should sign up by mailing the registration and medical form plus full payment to our office. Each camper will receive an e-mail confirming enrollment. *Registration will **not** be accepted on the day of camp.*

Camp Schedule

March 29 - April 2, 2010
Monday - Friday, 1:00-4:00 p.m.

Camp Location

Camp will be held at the Village of Lisle Benedictine University Sports Complex.

What To Bring

- shorts
- T-shirt
- water bottle
- shin-guards
- soccer ball
- soccer shoes indoor & outdoor

Please label all items.

Camp Registration Form

Player's Name: _____

Birth Date: _____ Age (as of 5/1/2010): _____

Team/Club: _____ Sex: M F

T-Shirt Size: Y-M Y-L A-S A-M A-L

Parent/Guardian: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone (H): _____ (W): _____

Cell Phone: _____

E-mail: _____

**Camp Attending: March 29-April 2,
1:00-4:00 p.m.**

Amount Enclosed: _____ Check #: _____
(Please make check payable to Benedictine University Soccer)

All proceeds benefit the Benedictine University men's and women's soccer teams.

I, the undersigned parent or guardian, release Benedictine University plus the camp directors and staff, from all liability for any injuries or losses incurred while at camp.

I, the undersigned parent or guardian authorize the athletic trainer and/or coaches at the Benedictine University Spring Break Soccer Camp to secure any and all medical treatment in the event that I cannot be contacted.

I further authorize any attending physician to render any and all medical care which he or she may deem necessary.

It is understood that, in any event, an attempt will be made to contact the parent or guardian before treatment is started.

I, the undersigned parent or guardian, also certify that my child is physically fit to attend the Benedictine University Spring Break Soccer Camp and participate in all activities.

Parent/Guardian Signature

Date

 **Benedictine University**
Soccer Camp
5700 College Road
Lisle, Illinois 60532
(630) 829-6165
rkettle@ben.edu
www.ben.edu

Official Office Use

Date:

Paid:

Discount:

