

COYOTE FUTSAL CAMP

FUTSAL IS THE OFFICIAL SOCCER INDOOR GAME PLAYED ON A BASKETBALL-LIKE COURT WITH 5 ON EACH SIDE. FUTSAL USES A SMALLER AREA OF PLAY AND A SMALLER WEIGHTED BALL TO FOCUS ON ENHANCING SKILLS IN QUICK DECISION MAKING AND BALL CONTROL.

CAMP DATE

All Skills Day Camp

Boys and Girls, Grades 1 - 7

February 20 (Saturday):

12:00pm - 3:30pm

CURRICULUM

(appropriate to age level):

- Technique
- Small Games
- Competition
- Fun Activities

FEE & REGISTRATION

(Please Print)

Early Registration Fee: By February 12th - \$20 for camp and T-Shirt

After February 12th: \$25 for camp and T-shirt

* \$10 for one additional family member; \$15 for two

Camper's Name: _____

Age: _____

Grade: _____

Address: _____

State _____ Zip _____

E-Mail: _____

Camp T-Shirt Size:

Youth:

Small Medium Large XL XXL

Adult:

Small Medium Large XL XXL

Total Fees Included: \$ _____

Checks Payable to: USD Soccer.

Each player must fill out registration form with parent/legal guardian signature.

Send application with camp fee to:

COYOTE Futsal CAMP
DakotaDome
414 E. Clark Street
Vermillion, SD 57069

PARENTAL CONSENT

(Parent's Release and Indemnity Agreement to Camp)

In consideration of the acceptance of this application for enrollment in the 2010 Futsal Camp, I/WE, intending to be legally bound, hereby for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against, all sponsors and all employees of the 2010 Futsal Camp for any or all damages which may be sustained and suffered by me in connection with my/our association with, or entry into this camp, and which may arise out of traveling to, participation in or returning from the camp. I/We hereby grant permission for my/our child to be a participant in the Futsal Camp and if any injury should occur during, traveling to or returning from the camp, I/We agree to pay all costs, present and future, through my/our medical insurance policy and/or personal finances.

Parent's/Guardian Signature

Daytime Phone #: _____

Nighttime Phone #: _____

If you are a person with a disability and desire any assistive devices, services or other accommodations to participate in this activity, please contact Disability Services at 605-677-6389 to request accommodations at least 48 hours prior to the event. EOE/AA



For more information, or to reserve your spot at team camp call:

605-677-3165