

**2017 – 25<sup>th</sup> Annual Girls Week  
Championship Soccer School  
August 13 – August 16 ( Rain date – Aug. 17)  
\*\*SACRED HEART H.S. – Kingston, MA\*\***

The Championship Soccer School Girls Week camp, now in its twenty-fifth year, provides the opportunity for high school girls to play and practice together for one week before the start of the fall season. The players will be coached by area high school coaches. All campers will receive a ball and camp t-shirt.

The camp will take place on seven fields at Sacred Heart. Each evening will consist of a one hour session of skills and tactics, followed by two 50 minute scrimmages against the other teams. All goalies will be separated from the field players from 4:00 to 5:30 to receive specialized goalkeeper instruction.

**Schedule**

**Sunday, Aug 13 : 4PM – 7:30PM**

**Mon – Wednes : 4:30 – 7:30**

**Goalkeeper training begins at 4PM each day.**

**All players should arrive 15 minutes prior to the start of camp.**

**Directions**

Route 3 to Exit 7 – route 44W. Exit to MA-80/Cherry St/N. Ply.  
Turn right onto Commerce Way – drive to end.  
Right onto route 80 – 1 mile to SHHS.

**DISCOUNT FOR EARLY REGISTRATION!!**

**Camp fee (paid by July 14) \$110.00**

**Camp fee (paid after July 14) \$130.00**

**Any questions, please contact Pete Kasarjian**

**Email – [Championship.Soccer.Team@gmail.com](mailto:Championship.Soccer.Team@gmail.com)**

**Phone : Cell - (508)942-8155**

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**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Town:** \_\_\_\_\_

**Parent's(emergency)contact phone:** \_\_\_\_\_

**Insurance carrier:** \_\_\_\_\_ **Policy #:** \_\_\_\_\_

**High school team:** \_\_\_\_\_

**Grade Level (please check) \_\_\_\_\_9 \_\_\_\_\_10 \_\_\_\_\_11 \_\_\_\_\_12**

**Men's Adult Shirt size (circle one) S M L XL**

The undersigned parent or guardian understands that the applicant will be engaging in physical activity during the program, which contains inherent risk of physical injury. The undersigned assumes the risk and releases Championship Soccer School, ELS Camps, Inc., Sacred Heart High School, and their officers, directors, agents and employees from any liability for personal injury arising out of the applicant's participation in the camp program.

I hereby grant my daughter permission to attend Championship Soccer School and to be treated by a licensed physician or member of the athletic staff for any personal injury or mishap. I further agree to pay my insurance company or otherwise for any medical treatment that may be necessary. I certify that my child is in good health and is able to participate in all camp activities.

**Parent(guardian) Name(print):** \_\_\_\_\_

**Parent(guardian) Signature:** \_\_\_\_\_

**Registration fee : \$110 (by July 14)\_\_\_\$130(after July 14)\_\_\_**

**Email:** \_\_\_\_\_

**FOLLOW ON TWITTER FOR ANY UPDATES: @teamweeksoccer**

**\*\*Please detach this registration for mailing. Make check out to Championship Soccer School. Mail form to:**

***Championship Soccer School***

***PO Box 1792***

***Plymouth, MA 02362***

