



# Xmas Soccer Camp Registration Form

205 Lewey Brook Drive  
Cary, NC 27519  
(919) 637-4000



..... Male  Female

First Name: ..... Age: .....

DOB (mm/dd/yyyy): .....

T/Shirt Size:    YS     YM     YL     YXL   
                         AS     AM     AL     AXL

Player's Level of play: Recreation: ..... Challenge: ..... Classic: ..... ODP: .....

Current Club/Team, if any: .....

Parent's Name: .....

Address: ..... City: ..... Zip Code: .....

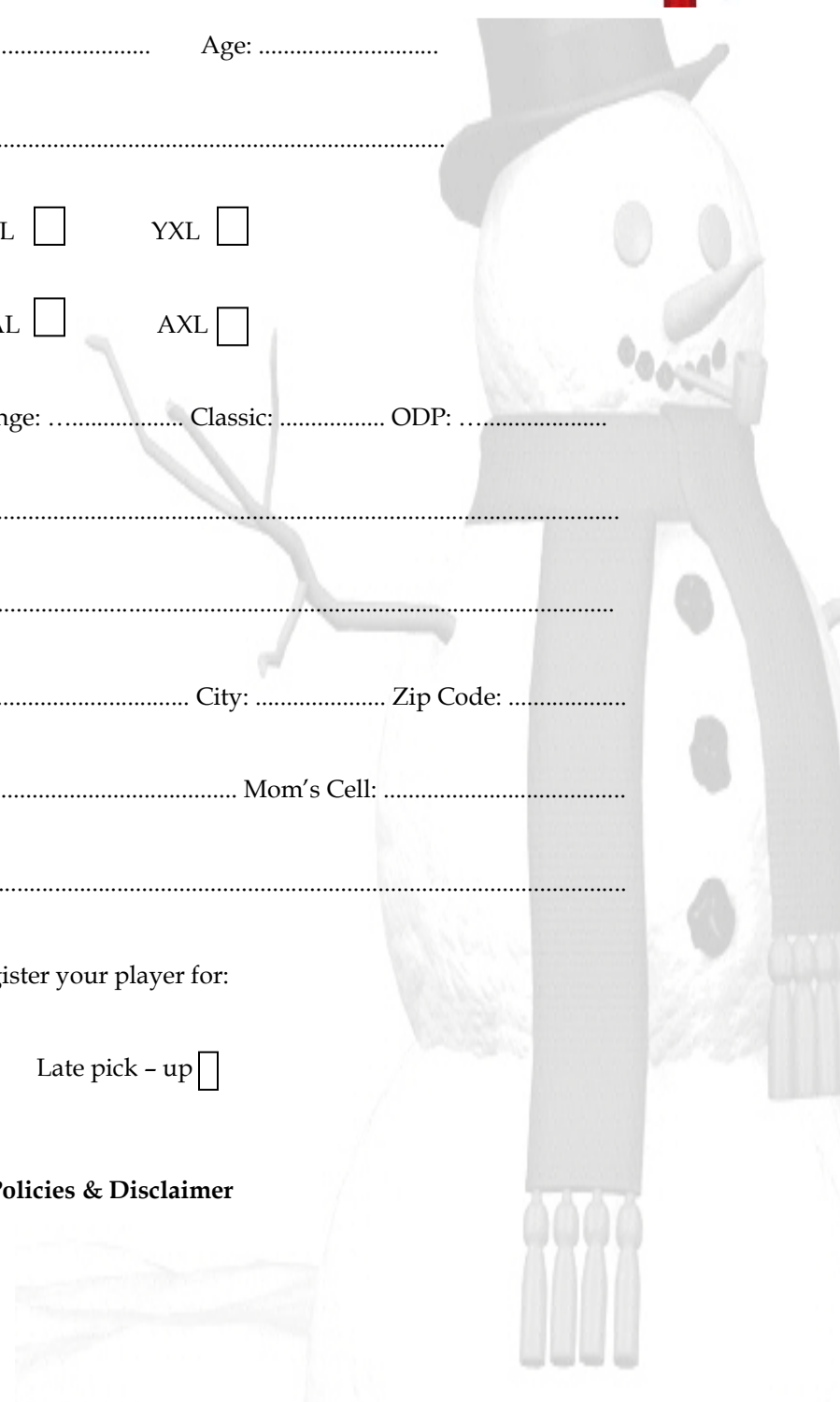
Home Phone: ..... Dad's Cell: ..... Mom's Cell: .....

Email Address: .....

Please, check any or all of the sessions you wish to register your player for:

Full Day     Half Day     Early drop - off     Late pick - up

**2.S.A Policies & Disclaimer**



My initials and signature is an act that I completely understood and agreed to the following and I take total responsibility for communicating these policies/disclaimer to my player(s).

**Deposit/Payment:** Deposit and all other payments are non-refundable. However, should a session registered for, be cancelled by the 2.S.A management for some reasons, your player will be given the opportunity to participate in the next academy session without a new payment.

Initials here: .....

**Training/Academy Forfeits:** The 2.S.A will not take responsibility for a player's failure to attend a camp, training session or the entire academy session already paid for.

Initials here: .....

I the undersigned, hereby certify that I am the parent or legal guardian of the participant (player). I understand the nature of the 2.S.A training/camp programs and believe my player is in good health condition.

I also understand that my player is in proper physical condition to participate in the 2.S.A training program. I hereby waive, release, covenant and forever discharge and hold harmless Shalom Soccer Academy and owners of camp/training facility, her staff, officers, agents, employees, representatives, volunteers and assigns from any and all liability, claims, actions, demands, and reasons of actions no matter what arose from or related to any loss, personal injury, or property damage the may be sustained or occur during the player's participation in any 2.S.A training program.

I agree to release any photo taken of my player at the 2.S.A program for present and future marketing of the 2.S.A

SIGNATURE: ..... DATE: .....

