

Raiders Varsity Soccer and SM HS Camps Presents

# Youth Summer Soccer Camp

**When:** June 26-29, 2017

**Where:** SM South Upper Turf Field

**Who:** Boys and Girls

**Age:** 5th-8th Grade

**Schedule:**

1:00p-2:30p

**Cost:** \$40

Players will work with and learn from both Caroline Ewing, varsity girls soccer coach and Matt Gordon, varsity boys soccer coach at SMS along with other coaches and HS players to develop Skill, Technique, and Tactics. Whether you are a beginning or advanced player, this camp is for you!

Register now at [www.RaiderSoccer.org](http://www.RaiderSoccer.org) or by filling out and mailing the completed form below with check made out to 'SMHSC':

SM HS Camps

9360 Lamar Ave

Overland Park, KS 66207

This Camp is not part of the Shawnee Mission School District or its representatives.

2017 Raider Youth Summer Soccer Camp  
Registration Form (**Registration also available online at [www.raidersoccer.org](http://www.raidersoccer.org)**)

Please complete and return this registration form, along with the \$40 payment (\$10 added walk-up fee) C/O  
SM High School Soccer Camps, INC to:  
SMHSC  
9360 Lamar Ave  
Overland Park, KS 66207

Participant's Name: \_\_\_\_\_ Grade 2016-2017: \_\_\_\_\_

Elementary/ Middle School Attended: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Parent Name: \_\_\_\_\_

Emergency Phone:(\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

(PLEASE PRINT LEGIBLY)  
T-Shirt Size (circle one): S M L XL XXL

**WAIVER STATEMENT:** The undersigned states that He/She understands that the High School Soccer Camp run by SM HS Soccer Camps is not and shall not be responsible for or liable for any illness, or injury to person or damage to property resulting from participating in said program, and the participant and the undersigned, if the participant is a minor or under legal disability, hereby forever release and holds harmless the said High School Soccer Camp, its employees, agents and representatives from any and all claims of any kind that the participant, or the undersigned or their respective heirs, executors, administrators, or assigns may have or claim to have resulting from participating in said program.

I HAVE READ AND UNDERSTAND THE WAIVER STATEMENTS.

Signature of person registering participant: \_\_\_\_\_  
REGISTRATION INVALID WITHOUT SIGNATURE

Date: \_\_\_\_\_