

## 2022 BHS Girls Soccer Technical/Tactical Training Camp SIGN UP

(August 8th-Aug 11th) 8-10am BHS Turf (we may use Merle Davies)

Fill out this form and bring it to Jennifer Kirwan at your first session.

Bring a check made out to **BHS Women's Soccer** the 1st day of camp.

## \$80: Technical/Tactical Skills Training Camp

If there are monetary issues please contact Jennifer

## **SCHOOL SPONSORED CAMP/CLINIC**

Student's Name:		r: Current School:		Student ID #	
Birthdate: Grade in School		Email:	Email:		
Parent/Guardian Name:		Emergency Contact Nar	me: Emergency C	Emergency Contact Phone#	
Parent Cell Phone:	Parent Work/Home Phone	: Physician Name	Physician Pho	Physician Phone #	
Health Insurance Provider:		Policy Number	Group Numbe	Group Number	
ALLERGIES, MEDICAL CONDITI	ONS, ETC. THAT WE SHO	JLD KNOW ABOUT:			
medical services in an emergenc	y, including injections, anest esponsible for any expenses	ned student, grant permission to the thesia, surgery, and medication, if s not covered by home insurance the	I cannot be contacted at the te	elephone numbers	
♦ HOLD HARMLESS I, agree to school board members, voluntee that I have carefully read and un	ers and agents from all claim	s, unless the claim is based on the			
Parent/Guardian Name (Print)		Guardian Signature	Date		