

University of Wyoming Soccer 3rd Annual Holiday Soccer Camp

**COME AND HAVE SOME SOCCER FUN WITH THE WYOMING
STAFF AND PLAYERS WHILE FREEING UP TIME FOR LAST
MINUTE HOLIDAY SHOPPING!!!!!!**

University of Wyoming Soccer will put on a Holiday Soccer Camp Tuesday – Thursday, December 20-22 from 6-8 pm each night. In addition, all players who register for the camp will receive an official Wyoming soccer t-shirt.

The camp is open to ages 5-12 and the cost of the clinic is \$50 (\$30 for each additional sibling). Space is limited so be sure to register early!!

Tentative Schedule

- 6:00 – 6:30 pm --- Warm-Up Games
- 6:30 – 7:30 pm --- Technical Skill Stations
- 7:30 – 8:00 pm --- Small Sided Games
- 8:00 pm --- Pick Up

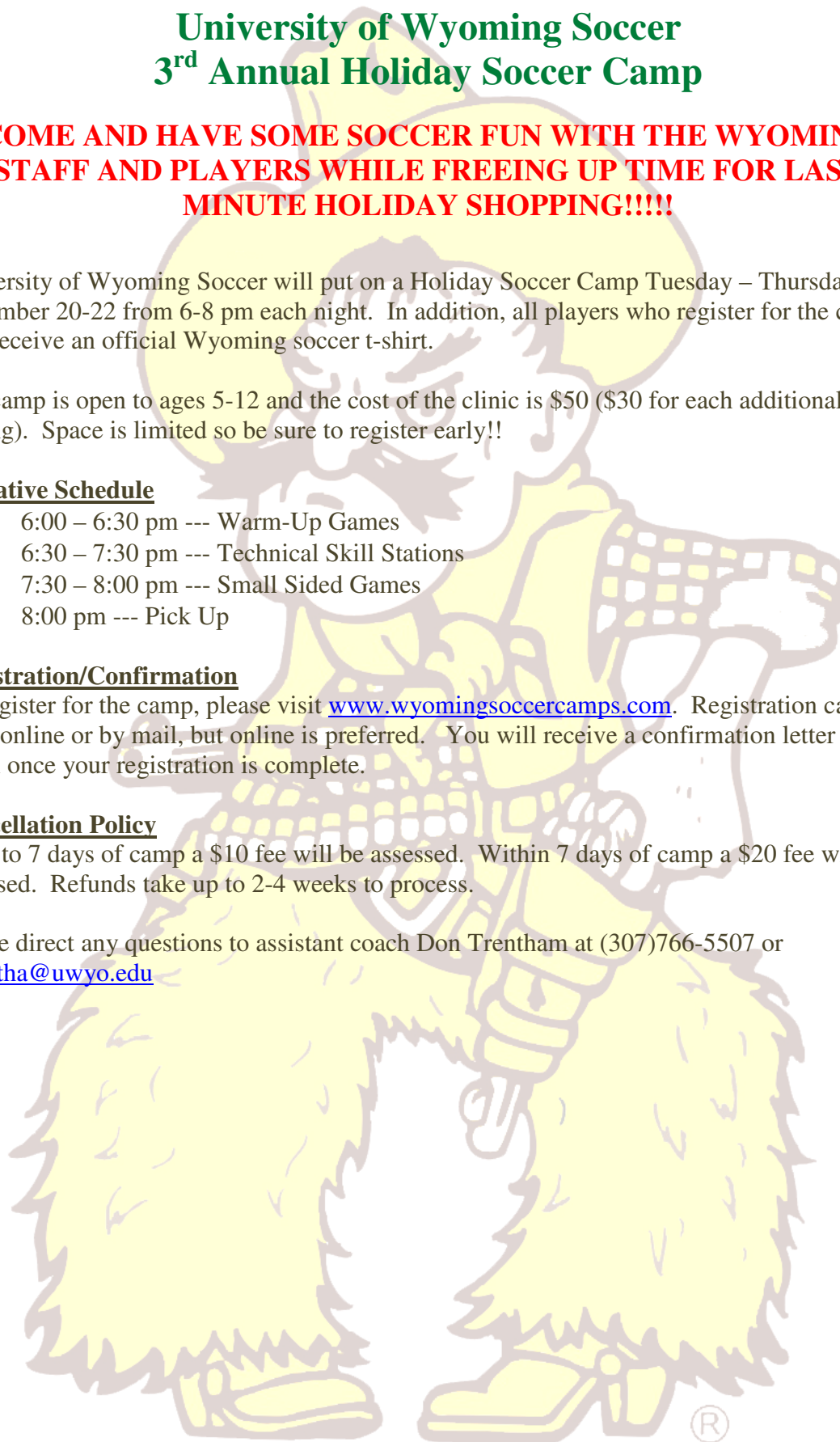
Registration/Confirmation

To register for the camp, please visit www.wyomingsoccercamps.com. Registration can be done online or by mail, but online is preferred. You will receive a confirmation letter via email once your registration is complete.

Cancellation Policy

Prior to 7 days of camp a \$10 fee will be assessed. Within 7 days of camp a \$20 fee will be assessed. Refunds take up to 2-4 weeks to process.

Please direct any questions to assistant coach Don Trentham at (307)766-5507 or dtrentha@uwyo.edu



Wyoming Soccer Camps 3rd Annual Holiday Camp Registration Form

Please provide the following detailed information and mail with your payment to (credit cards not accepted for mail in registrations):

*Register on-line at www.wyomingsoccercamps.com

or

University of Wyoming Soccer Camp
Dept. 3414
1000 E. University Avenue
Laramie, WY 82071

Participant's Name: _____ Position(s): _____

Parent's Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Cell #: (_____) _____ Parent's Cell #: (_____) _____

Participant's E-Mail Address: _____

Parent's E-Mail Address: _____

Grade, Fall 2011: _____ Date of Birth (mm/dd/year): _____ Age: _____

T-Shirt Size (circle one): YS, YM, YL, AS, AM, AL, AXL

Insurance Company: _____

Insurance Company Phone #: _____

Group Policy #: _____ Policy Holder Name: _____

Emergency Contact (other than parent): _____

Emergency Contact Cell Phone #: (_____) _____

Payment Enclosed (\$50, \$30 each additional sibling): Check or Money Order only

*** Confirmation letter and waiver will be emailed to you upon registration, please mail back or bring to camp. If you do not have a signed waiver you will not be allowed to participate – NO EXCEPTIONS!**

