



MEDINA HIGH SCHOOL
GIRLS SOCCER



Presents its

2009 Youth SUMMER SOCCER CAMP

June 8-11

Huffman and Cunningham fields



U7-U9 Developmental Camp

Who: Girls 7-9 years old
Where: Huffman and Cunningham Fields
When: June 8-11, 2009
9:00-11:00 am
Fee: \$40.00 per player
What: This camp will focus on individual technical skills as well as some basic team tactical concepts.

U10-U12 Advanced Camp

Who: Girls 10-12 years old
Where: Huffman and Cunningham Fields
When: June 8-11, 2009
8:30-11:00
Fee: \$60.00 per player
What: This camp will focus on advanced individual technical skills. We will also cover a variety of team tactical concepts including pressure/cover defending and team play in the offensive third.

Camp director: MHS head varsity girls coach Doug Coreno
Staff members include the MHS varsity coaching staff and players.

Please note:

- All campers must bring a soccer ball, shin guards, and a water bottle.
- 1st aid available on site. Huffman shelter for bad weather.
- Campers will receive a camp t-shirt and camp photo.
- Registration forms and fees are due by May 29, 2009
- \$20 discount for any family sending two girls to camp

Questions? Contact Coach Coreno at ClevelandFC@aol.com



2009 Medina High School
Youth Summer Soccer Camp
Registration Form

Name _____ Grade (Fall 09) _____

Address _____

City/Zip _____

Phone _____ Birth Date _____

Mom's Name _____ Phone _____

Dad's Name _____ Phone _____

I would like to attend (check one):

- U7-9 Developmental Camp, June 8-11 - \$40.00
- U10-12 Advanced Camp, June 8-11 - \$60.00

Shirt size (check one):

- Youth Small Youth Medium Youth Large
- Adult Small Adult Medium Adult Large

Please return the registration/medical release form and fees by May 29, 2009

(checks payable to Medina Athletic Dept).

Mail to:
Coach Doug Coreno
5216 Autumnwood Lane
Brunswick, OH 44212



2009 Medina High School
Youth Summer Soccer Camp
Medical Release Form

Does the athlete have any medical/health problems that the Medina Soccer Staff should be aware of? If yes, please explain.

If the parent/guardian cannot be reached in an emergency, whom could we call?

Name _____

Phone _____ Cell _____

I hereby give Coach Coreno and the members of the coaching staff my consent to use their best judgment in applying/securing medical aid and/or emergency medical service in case I cannot be reached.

I hereby attest that my son/daughter is physically able to participate in all aspects of the camp.

I hereby waive the Medina High School Soccer Coaching Staff and the Medina City Schools from any and all liability for injury/accident incurred while participating, traveling to and/or from, or while on the Huffman and Cunningham soccer fields.

Parent/Guardian Signature _____

Date _____