



## 2020 Camp Registration Form

Child Full Name (1) \_\_\_\_\_ M/F Circle One Current Grade \_\_\_\_\_ Age \_\_\_\_\_ Birthday \_\_\_\_\_

Child Full Name (2) \_\_\_\_\_ M/F Circle One Current Grade \_\_\_\_\_ Age \_\_\_\_\_ Birthday \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mom's Name \_\_\_\_\_ Dad's Name \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Mom Cell (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Dad Cell (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

School Name \_\_\_\_\_

Parents Primary Email \_\_\_\_\_

**July 6, 2020 - July 30, 2020**

Monday - Thursday: 3:30-6:00

- July 6 - July 9
- July 13 - July 16
- July 20 - July 23
- July 27 - July 30

\*\$155 per week

**July 6, 2020 - August 1, 2020**

Monday, Wednesday, Friday:  
6:30 - 8:00pm for JV & HS Players

- July 6, 8, & 10
- July 13, 15, & 17
- July 20, 22, & 24
- July 27, 29, & 31

\*\$55 per player per 3 day week  
(same price for 1, 2, or 3 days)

**July 6, 2020 - August 1, 2020**

Tuesday, Thursday, Saturday:  
6:30 - 8:00pm for Players 13-15 years old

- July 7, 9, & 11
- July 14, 16, & 18
- July 21, 23, & 25
- July 28, 30, & Aug. 1

\*\$55 per player per 3 day week  
(same price for 1, 2, or 3 days)

*I, the parent/guardian of the above named participant, a minor, agree that I and the participant will abide by the rules and regulations of CSA New York, Complete Soccer Academy. In consideration of the participant's participation in the programs, intending to be legally bound, hereby release and indemnify CSA New York, Complete Soccer Academy, the owners and operators of the facilities used for the programs, and each of their respective directors, Officers, employees, agents, and representatives from against all claims, liabilities, damages, or causes of action arising out of or in connection with the participant's participation in the programs. I further grant CSA New York, Complete Soccer Academy the right to use the participant's name, picture, and/or likeness in printed, broadcast and other material concerning the programs provided such use is related to the participant's status as a participant in the programs.*

Parents Signature \_\_\_\_\_ Date: \_\_\_\_\_

Please mail registration form to: **CSA New York: Complete Soccer Academy**  
**Attn: David Villalobos**  
**150 Gailmore Drive**  
**Yonkers, NY 10710**

Make checks payable to: **David Villalobos**