

2014 **SOCCER CAMP****YOUTH CAMP**

**WHAT:** Head Coach Dave Blomquist and the Cougar men's soccer team are pleased to again host soccer camps this summer! The Youth Camp is for players of all ages and abilities. Azusa Pacific's coaching staff and current team members will instruct the campers, focusing on player improvement in a fun and positive environment. Join us for an exciting summer of soccer!

**WHO:** Open to boys and girls ages 5-12

**WHEN:**  Monday-Thursday, June 9-12, 9a.m - 12p.m.  
 Monday-Thursday, June 16-19, 9a.m - 12p.m.  
 Monday-Thursday, July 7-10, 9a.m - 12p.m.

**WHERE:** West Campus Soccer Field, Azusa Pacific University  
 701 E. Foothill Blvd., Azusa, CA 91702 (North side of Foothill Blvd. at Cerritos Ave.)

**COST:** \$95 per player (includes t-shirt and soccer ball)

**DAILY SCHEDULE:**

9:00 - 9:30 a.m.	Welcome and Warm-up
9:30 - 10:30 a.m.	Skills and Drills
10:30 - 11 a.m.	Break and Coach Demonstration
11 a.m. - 12 p.m.	Scrimmage Games

**WHAT TO BRING:** Shoes, Sunscreen, Water and Snack



For more information, contact camp co-director Kolt Callaway at (626) 494-1355, or [artex@apu.edu](mailto:artex@apu.edu), or visit [www.apu.edu/athletics/soccer/mens/camps/](http://www.apu.edu/athletics/soccer/mens/camps/).

**REGISTRATION:**

Please complete one form per child per camp and provide all requested information below. Registration will be accepted up until the first day of camp if space is available. An additional \$5 charge will be added for same day registration. If registering within two weeks of camp please contact Kolt to confirm if space is available. Checks should be made payable to Azusa Pacific Soccer and should be mailed along with this form to:

**Soccer Camp, Azusa Pacific University, PO Box 7000, Azusa, CA, 91702-7000.**

There is a \$10 discount on the registration cost for each additional child from the same family who signs up for the Youth camp.

Camper's Name: \_\_\_\_\_ Age: \_\_\_\_\_ Birthday: \_\_\_\_\_

Grade: \_\_\_\_\_ School District: \_\_\_\_\_

Parents'/Guardians' Names: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

T-Shirt Size \_\_\_\_\_ Dates (check one)  June 9-12  June 16-19  July 7-10

Amount of Check Enclosed: \$ \_\_\_\_\_