

**Tecumseh Recreational Soccer Club Presents: Dutch Touch Soccer Camp****Week of: July 2 - July 6, 2018****When:** 10:00 am - 3:00 pm each day with a break for lunch.**Where:** Green Acres Park, Tecumseh**Cost:** \$125.00 (placed with appropriate age group)**Camp Registration Deadline: June 22, 2018**

Training staff will include coaches from The Netherlands, U.S.A and Canada. Training will include fun-oriented activities that are intended to stimulate the curiosity and excitement of the players. This grouping is for non-competitive players. Spaces are limited to the first 100 players. Registration includes a ball and a t-shirt. Please fill out the registration form and mail along with a cheque payable to Tecumseh Recreational Soccer Club at the following address:

Tecumseh Recreational Soccer Club  
13300 Tecumseh Rd., East P.O. Box 178  
Tecumseh, ON N8N 4R8

Please bring a lunch, water, shin guards and soccer shoes. All campers must come to the St. Clair Beach Optimist Centre (formerly the Teen Action Centre) Sunday July 1, 2018 between 12:00 pm – 2:00 pm to sign in and pick up their ball and t-shirt. Please complete the following & submit with your registration:

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Player's Name: \_\_\_\_\_ Age: \_\_\_\_\_

**T-shirt size (circle one):** Youth:    S    M    L            Adult:    S    M    L

**Week #1 (July 2 - July 6, 2018) YES**

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Parents' Name: \_\_\_\_\_

Email: \_\_\_\_\_ Team: \_\_\_\_\_

*Insurance and Medical Care waiver of liability & disclaimer: To insure the Tecumseh Recreational Soccer Club (TRSC), accept registration and permit participation in training activities by the named individual, I, the parent/guardian of said individual, hereby give my consent and agree to release, indemnify and hold harmless TRSC, its coaches and representatives from any claim rising out of injury to the named individual. I also hold harmless TRSC, its coaches and representatives from any claim rising out of injuries or conditions caused by or aggravated by my refusal to obtain medical treatment based on religious or philosophical beliefs. Emergency Authorisation: I, the undersigned parent/guardian of the participant, a minor, hereby authorise the coaches of TRSC to secure all medical treatment in the even that I cannot be contacted. I further authorise any attending physician to render any and all medical care, which he/she may deem necessary. I, the undersigned parent/guardian of the participant certify that my child is physically fit to attend this training.*

Parent/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Any questions? Please email Steve Grigorakis: [sgrigs58@gmail.com](mailto:sgrigs58@gmail.com)