

$\label{eq:constraint} \begin{array}{l} \underline{C_{AMP} \ D_{ATES}} \\ July \ 15^{th} - July \ 19^{th} (Youth \ Boys) \\ July \ 15^{th} - July \ 19^{th} (HS \ Boys) \\ July \ 22^{nd} - July \ 26^{th} (HS \ Girls) \\ Aug. \ 19^{th} - Aug. \ 23^{rd} (Youth \ Girls) \end{array}$

YOUTH PROGRAM (3rd - 7th grade) - East Northport Middle School "Path Field" HIGH SCHOOL (8th- 12th grade) - Veteran's Memorial Park (Field #4)

Come be a part of the **Tiger Soccer Academy**! Register for our weeklong camp featuring Varsity coaches, Varsity players, and College players. Daily sessions will work on individual skills, soccer knowledge, passing, shooting and all aspects to better your soccer game. Daily camper of the day, tournament style games and a positive learning environment. Additionally, each day will have a Coaches talk highlighting one aspect of soccer. If you have any questions, please call Don at 516-680-6658 or email tigersocceracademy17@gmail.com





IF INTERESTED, YOU CAN NOW REGISTER ONLINE USING THE QR CODE

Tiger Soccer Academy

Camp Dates/Options: "circle one"

Boys Youth: (3 rd - 7 th grade)	9:00 am – 1:00 pm	(7/15-7/19)	\$295 (\$275 early bird special)
Boys High School (8 th – 12 th grade)	2:00 pm - 5:00 pm	(7/15-7/19)	\$240 (\$220 early bird special)
Girls Youth: (3 rd - 7 th grade)	9:00 am – 1:00 pm	(8/19-8/23)	\$295 (\$275 early bird special)
Girls High School (8 th – 12 th grade)	9:00 am - 12:00 pm	(7/22-7/26)	\$240 (\$220 early bird special)
*** Early Bird Special Registration Deadline is 6/1/24		*** \$20 Family discount for second registrant	

Player Profile:

Player's Name:	Date of Birth:	
Player's Address:	City:St:Zip:	-
Primary Phone:	Email:	
Club Team:	Grade/School in September	
T-Shirt Size: Y/A	Emergency Contact:	

Permission to Participate:

Release of Liability and Authorization for Medical treatment:

The named participant is in good health and has my permission to participate in the soccer camp(s). I hereby release Tiger Soccer Academy and all their respective employees, officers, directors, agents, officials, and volunteers from and against any liability claims and demands for any injury or illness incurred at the soccer camp/program. I, _______ hereby assume complete financial responsibility for any personal injury and property damage created as a result of an intentional or negligent act of my child while he or she is attending soccer camp. If my child needs medical treatment and my consent cannot be obtained, I also agree that Tiger Soccer Academy has my consent to appropriate medical treatment for my child. This release will be in effect during the camp/program dates listed above.

Date:	Signature:	Please
	send completed registration form and checks made out to Tiger Soccer Academy to:	

Tiger Soccer Academy 6 Starlit Drive Northport, NY 11768

We will also accept payments via VENMO @tigersocceracademy1 (Last 4 digits - #0179). If you have any questions, please call Don at 516-680-6658 or email tigersocceracademy17@gmail.com