

Beatrice

Orangemen

SOCCER CAMP



June 20 - 23, 2023



Tuesday - Friday

5:30 - 6:15 K- 2nd grade

6:45 - 8:00 6 - 8th grade

5:30 - 6:30 3 - 5th grade

8:00 - 10:00 9 - 12th grade

House of Orange

**KIDS NEED: * POSITIVE ATTITUDE * COMFORTABLE SPORTS SHOES
* BOTTLED WATER * SHIN GUARDS * SOCCER BALL**

SUMMER SOCCER CAMP & MEDICAL TREATMENT RELEASE:

I GRANT APPROVAL FOR MY CHILD TO PARTICIPATE IN THIS CAMP AND RELEASE BEATRICE HIGH SCHOOL AND ANY INSTRUCTORS, COACHES, TRAINERS, AND ASSISTANTS FROM ANY LIABILITY ARISING FROM HIS/HER PARTICIPATION IN SAID ATHLETIC CAMPS. I ALSO UNDERSTAND WITH THE CURRENT STATE OF COVID, MY CHILD IS ATTENDING AT THEIR OWN RISK. I UNDERSTAND BEATRICE HIGH SCHOOL DOES NOT PROVIDE HEALTH OR MEDICAL INSURANCE FOR PARTICIPANTS.

CONSENT IS HEREBY GIVEN TO THE BEATRICE HIGH SCHOOL INSTRUCTORS, TRAINERS, COACHES, AND OTHER STAFF TO GIVE OR SEEK MEDICAL AID REQUIRED IN THE CASE OF EMERGENCY.

SUMMER CAMPS WILL NOT BE PRORATED DUE TO STUDENT'S INABILITY TO ATTEND ALL SESSIONS.

REGISTRATIONS WILL NOT BE ACCEPTED WITHOUT PAYMENT. IF COST IS AN ISSUE, PLEASE GET IN TOUCH WITH COACH DITTBRENNER BEFORE CAMP STARTS, KDITTBRENNER@BPSNEBR.ORG

NO REFUNDS WILL BE GIVEN FOLLOWING REGISTRATION. PLEASE BE SURE YOUR CHILD CAN ATTEND BEFORE YOU REGISTER.

I HAVE READ AND AGREE TO STATEMENTS CONTAINED IN THE SOCCER CAMP RELEASE AND MEDICAL FORM ABOVE.

PARENT/GUARDIAN SIGNATURE REQUIRED: _____ **DATE** _____

PARTICIPANT'S NAME _____ **GRADE FALL '23** _____ **SHIRT SIZE** _____

SESSION K-2ND \$35

3RD - 5TH \$40

6TH - 8TH \$45

9TH - 12TH \$50

PHONE NUMBERS - STUDENT _____ **PARENT** _____

PARENT EMAIL ADDRESS _____

PLEASE LIST HEALTH OR OTHER CONCERNS HERE: _____

MAKE CHECKS PAYABLE TO BHS BOYS SOCCER. RETURN TO BHS OFFICE OR 415 GRANT ST BY MONDAY, JUNE 12.