



www.GreatLakesSoccerAcademy.com
1-866-789-GLSA

Great Lakes Soccer Academy
YOUTH CAMPS
Ada Youth Soccer
(Ada Youth Fields)

JOIN YOUR FRIENDS AND TEAMMATES AT ONE OF THESE GREAT CAMPS

Kickers Academy
(5 & 6 Year Olds)
6:00-7:30pm

This camp is open to boys and girls and is intended to give the player basic soccer concepts. Recommended ages for this camp are 5-6 year olds. Emphasis will be placed on individual play within a fun environment. Campers will really enjoy learning the fundamentals by playing a lot of fun games. Our staff is professionally trained to help your child learn and enjoy the game of soccer. Only \$65 if registered by June 24. \$75 for late registrations.

Select Academy
(7-9 Year Olds)
6:00-8:30pm

This camp is open to boys and girls and is intended to give the player basic and advanced soccer concepts. Recommended ages for this camp are 7-9 year olds. Emphasis will be placed on individual play within a fun environment. Campers will enjoy playing a lot of fun games but will also be given the techniques needed to improve their play. For both beginner and current players. Only \$80 if registered by June 24. \$90 for late registrations.

Elite Academy
(10-14 Year Olds)
5:30-8:30pm

This camp is open to boys and girls and is intended to give the player advanced soccer concepts. Recommended ages for this camp are 10-14 year olds. All campers will be introduced to advanced soccer drills and games. Campers will enjoy being introduced to more advanced soccer concepts and will be given the techniques that are needed to improve their play. Only \$95 if registered by June 24. \$105 for late registrations.

- TWO WAYS TO REGISTER:** 1. Fill out the form below and mail with payment to GLSA, 4565 Elida Rd, Elida Ohio 45807
2. Go to www.GreatLakesSoccerAcademy.com and Register Online

___ Bath (July 18-21) ___ Elida (July 18-21) ___ Ada (July 25-28) ___ Shawnee (July 25-28) ___ Van Wert (July 25-28)

Name of Camper: _____ Gender: Male Female

Address _____

City _____ State _____ Zip _____

School _____ Grade entering next year _____

T-Shirt Size: YS YM YL AS AM AL AXL

CONSENT FOR MEDICAL TREATMENT (MINOR)
By agreeing to the terms and conditions, I release my child to participate in the Great Lakes Soccer Academy (GLSA). I recognize that my signature on this release is a condition of your permitting my child to participate. I certify that my child is in excellent physical health, and may participate in physical activities at camp. I certify that there are no physical limits to my child's participation in the camp. Permission is granted for my child to receive emergency medical treatment if needed. I hereby release and discharge GLSA, and all their affiliated entities from any and all liability, claims, demands, and causes of action for personal injury, property damage, and/or other loss suffered by my child in connection with his/her participation in the camp. I represent that I am a parent/guardian of the minor named above and I agree that the grant and release contained therein binds me and the minor to all its terms. If I cancel the registration, I agree to pay the \$50 non refundable deposit.

Parent Name: _____

Signature of Parent/Guardian X _____ Date _____

Parent Email: _____

Parent Contact Number: Mobile: _____ Home: _____

Current Medical Conditions: _____