

Registration Form

Camper's Name:

Girl _____ Boy _____

Grade _____

Age: _____ Shirt Size _____

Address:

City: _____

Zip: _____

E-Mail:

Parent Phone #:

Complete the registration and medical release forms and mail with a check (Made out to Harrison Soccer Booster Club) to:

Jon Gross

169 Misty Hill Trail

Dallas, GA 30132

Questions, contact Jon Gross at

Jonathan.gross@cobbk12.org



Harrison Soccer Camp

\$125

June 7th-10th Monday-Thursday

6:00pm-9:00pm in Cobleigh Stadium

Camp is open to all rising 6th-rising 9th

Graders

***Friday is a make-up day if needed**

Camp Director

Jonathan Gross

Harrison H.S. Social Studies Teacher

Harrison H.S. Varsity Men's and Women's

Head Soccer Coach

Coach of 2007 Men's 5-A Georgia State

Champions

2007, 2013, 2014 & 2019 MDJ Cobb

County Coach of the Year

USSF "A" License

NSCAA Premier Diploma

Over 25 yrs. of coaching experience at the high school, collegiate, and club level

Medical Release Form

I/We, the undersigned hereby certify that I (we) am (are) the parent or legal guardian of the camper. I hereby give permission for the staff of the camp to seek appropriate medical attention in the event of accident, injury or illness. I will be responsible for all costs of medical attention and treatment.

I/We, the undersigned for ourselves, our heirs, executors and administrators waive, release and forever discharge the soccer camp staff, officers, agents, employees, representatives and successors and assign of and from all rights and claims for damages, injury or loss to person or property, which may be sustained or occur during participating in soccer camp activities or while at camp, whether or not damages, injury or loss due to negligence.

I/We hereby acknowledge that our child is physically fit and mentally capable of participating in soccer camp activities.

Insurance Co.:

Policy Holder:

Policy #

Parent Signature:

Date:

Special Considerations:

Unless you notify us to the contrary we can only assume that each person registering for camp is in good physical condition and free of limiting conditions. Please notify us if there is any factor that might limit a person registering for camp so that we can do our best to provide the appropriate services and attention