



# SAN DIEGO SOCCER CAMP &

# 619 FUTSAL

## 2016 WINTER FUTSAL CAMP

December 27-30 • Tuesday- Friday • 9am - 12pm

Miramar College Gym

\$175 per player, includes camp T-shirt

Ages 6 -16 • Space is limited

For more information visit [www.619futsal.com](http://www.619futsal.com)



### REGISTRATION FORM

Name: \_\_\_\_\_

619 Futsal Player Card:  YES  NO

Age: \_\_\_\_\_ Gender:  Male  Female

Futsal Ball:  YES additional \$30 (optional)

Parent's Email: \_\_\_\_\_

T-shirt Size: \_\_\_\_\_

Parent's Phone: \_\_\_\_\_

I hereby give permission for my minor child to participate in the 619 Futsal Summer Camp. I recognize and understand that the minor child will be participating in activities which may expose the minor child to some level of risk of injury and that the minor child will be participating at his/her own risk. I agree to and hereby do release and hold harmless 619 Futsal and its agents, officers, directors, and employees against loss (including reasonable attorneys' fees) from any and all claims or causes of action of any kind or nature that may be brought by or on behalf of the said minor child or by me arising out of any and all known or unknown, foreseen or unforeseen bodily or personal injuries, damages to property and consequences thereof which may be sustained by the said minor child or by me arising out of or in connection with the Camp. Furthermore, I agree to indemnify 619 Futsal for all loss or damage to the premises, facility or equipment caused by my minor child. Such indemnification shall include costs and expenses incurred by 619 Futsal including reasonable attorneys' fees. I also agree the Camp may use images of my child for publicity and advertising purposes.

Parent's Printed Name: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Mail Completed form and registration fee to: 619 Futsal Post Office Box 262612, San Diego, CA 92196