

# Cy-Fair Bobcat Soccer Camp

## **Boys, Grades 5-9 only (incoming 5<sup>th</sup>—9<sup>th</sup> graders)**

**DATES:** June 6-8, 2018, 8:30am – 11:00am, 5<sup>th</sup> grade – 9<sup>th</sup> Grade, Boys.

**(\*\*\*\*CFISD 7<sup>th</sup> – 9<sup>th</sup> grade students will require an athletic physical that may be used for school participation as well)**

**COST: \$50.00**      **PLACE:** Cy-Fair HS practice fields, between the baseball field and the tennis courts.

**COACHING STAFF:** Cy-Fair HS soccer coaches: Jorge Baca, Raul Martinez and Emilio Chavez plus current college soccer players and former Cy-Fair Bobcat soccer players.

**The Bobcat soccer camp will focus on basic skill development and FUN! This will be a great opportunity to improve various aspects of your player's technique, compete against other players in a healthy environment and have fun! All pre-registered players will receive a camp T-shirt!**

**In addition to skill development,** players will get the opportunity to create friendships with other players and compete in skills competitions. Players will be grouped into age and skill level appropriate groups.

### **EQUIPMENT NEEDED:**

Players need to bring a soccer ball, shinguards, soccer or other safe athletic shoes, comfortable clothing and a water bottle.

### **REGISTRATION FORMS AND PAYMENT:**

Detach Registration Form below and attach a \$50.00 cash, money order or pay online. Forms and clinic fee must be mailed in at least one week prior to event. Please note: **We do take registration on the day of the camp, but this will not guarantee a t-shirt. (Online payment link is provided on the other side of this flyer).**

Mailing address: Cy-Fair High School, Attn: Emilio Chavez, Men's Soccer Coach, 22602 Northwest Fwy, Cypress, TX 77429.

**\*\*\*\*PLEASE ...Make money order payable to Cy-Fair High School\*\*\*\***

**See other side of flyer for Online payment link**

Questions????????? [echavez2510@live.com](mailto:echavez2510@live.com) or [emilio.chavez@cfisd.net](mailto:emilio.chavez@cfisd.net) or 832.845.9451 - mobile

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## **REGISTRATION / CONSENT FORM**

*(PLEASE PRINT AND FILL IN ALL INFORMATION)*

### **CFISD Parent or Guardian Athletic Participation Consent**

**Student's Name:** \_\_\_\_\_ **Home Campus (Fall, 2018):** \_\_\_\_\_ **Age:** \_\_\_\_\_

I hereby give my consent for the above named student to participate in school activities including various athletic practices, competitions and camps. I understand it is my responsibility to provide health insurances coverage for this student. I further understand CFISD is not liable for any injuries resulting from participation in school athletics. If in the judgment of any representative of the school, this student needs immediate care and treatment as a result of any injury or sickness, I do hereby request, authorize and consent to such care and treatment as may be given to said student by any physician, trainer, nurse, hospital, or school representative.

**DATE:** \_\_\_\_\_ **NAME OF GUARDIAN:** \_\_\_\_\_

**SIGNATURE OF GUARDIAN:** \_\_\_\_\_ **PHONE NUMBER:** \_\_\_\_\_

**STREET ADDRESS:** \_\_\_\_\_ **CITY, STATE and ZIP:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**PERSON TO NOTIFY IN CASE OF EMERGENCY:** \_\_\_\_\_

**RELATIONSHIP TO ATHLETE:** \_\_\_\_\_ **EMERGENCY PHONE #:** \_\_\_\_\_

**T-SHIRT SIZE (circle size desired):** YS   YM   YL   AS   AM   AL

## ONLINE PAYMENT

Please type this URL address into your smart phone or computer to pay for the Boys Soccer Camp!

<https://cypress-fairbanksisd.schoolcashonline.com/Fee/Details/9565/135/False/True>