



YMS Technical Training Program Skills Camp 2017

Venue: Macclesfield Park Turf Field
Dates: July 10th - July 14th
Times: 9am-12noon
Ages: U6-U14
Cost \$150.00

Coaching Staff Camp Director David Simpson holds licenses from the USSF, NSCAA, Coerver Coaching, Brazilian CBF, Scottish FA and UEFA; Simpson has coached throughout the USA and Europe and is currently the Associate Head Coach at Holy Ghost Prep and the Assistant Director of Coaching at YMS. He has put together a very exciting and qualified coaching staff that includes the YMS Academy & Premier staff trainers.

For more information please contact David Simpson at davasimo@yahoo.com or call 215-290-0278.
Camp space is limited; please register by June 30th.
Participants should bring a non-fizzy drink, a high carbohydrate snack, and a ball.
NO CONFIRMATION will be sent and all participants should arrive at least 15 minutes prior to start.

Please send your application form to:

David Simpson
Attn: YMS Skills Camp 2017
325 Glenside Avenue
Morrisville, PA 19067
Checks payable to "David Simpson"
I would like to take part in the soccer camp at YMS

Name.....Age.....D.O.B...../...../.....

Address.....Zip.....E-mail.....

Emergency/Tel..... Club/Team.....

Tee shirt size (circle) Youth M YL Adult S M L

Medical conditions Fee enclosed

RELEASE STATEMENT:

I, the parent(s) or guardian(s) of the registrant, a minor, agrees that the registrant and I (we) will abide by the rules of YMS and EPYSA, its affiliated organization and sponsors. Recognizing the possibility of physical injury associated with soccer and in consideration for YMS and EPYSA accepting the registrant for its soccer programs and activities, I (we) hereby irrevocably and forever release, discharge and/or otherwise indemnify and agree to defend YMS, its officers, coaches, trainers, managers, referees, and EPYSA and affiliated organizations, including the owners of the fields and facilities utilized for the soccer program (the "Indemnified Parties") from and against any and all claims which I (we) and/or the minor may have for any and all injuries and/or damage to property arising out of (i) the minor's participation in any YMS and/or EPYSA soccer programs and activities, and (ii) the actions or inactions of the Indemnified Parties. I affirm the registrant is in sound health physical condition and that the child is covered by health insurance secured independently.

Parent or Guardian Signature: (if Under 18)

_____ Date: ____/____/____