



ATTACK Player Development Camp

Instructors Include

**Nate Hetherington - Assistant Director of Coaching
along with other Attack Professional Coaches**

This is a camp for competitive players and is designed for the ambitious player, committed in their development to the dynamic ball-possession style of the modern game. Themes include improving ball mastery, possession with purpose to attack, creativity in the final third, goal scoring, defensive intensity and maintaining a composed but aggressive mindset. ***This camp is for competitive players in birth years 2015-2005.*** Players should come ready to work with like-minded, high-level players, and a desire to improve your game!

Monday - Wednesday, June 19-21 & August 7-9 | 9:00 - 11:30 AM | RSF Sports Field

\$165 for 3 days or \$60/day

Choose your session: June 19-21 August 7-9

If not attending all 3 days, which days will you be attending?

Monday Tuesday Wednesday

Register online at RSFsoccer.com, or by using the form below.

Scholarships Available

Player Name _____ DOB _____ Gender: M or F

T-Shirt Size (Circle One) YS YM YL YXL AS AM AL

Emergency Contact _____ Relationship to Player _____

Email _____ Cell Phone _____

MEDICAL RELEASE/CONSENT FOR MEDICAL TREATMENT/REFUNDS

1) Recognizing the possibility of physical injury associated with soccer and possible exposure to and illness from infectious diseases, including but not limited to MRSA, influenza, and COVID-19, and in consideration for RSF Soccer accepting the registrant for its soccer programs and activities (the "Programs"), I KNOWINGLY AND FREELY ASSUME ALL SUCH INHERENT RISKS, both known and unknown, EVEN IF ARISING FROM THE ACTIVE OR PASSIVE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and, I willingly agree to comply with the stated and customary terms and conditions for participation in such Sanctioned Activities as regards to protection against such injury or infectious diseases. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS Releasees their officers, directors, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the Sanctioned Activities, WITH RESPECT TO ANY AND ALL ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE ACTIVE OR PASSIVE NEGLIGENCE OF RELEASEES OR OTHERWISE, to the fullest extent permitted by law. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, hereby agree to defend and indemnify RELEASEES for all such claims, causes of actions, allegations or matters arising out of, relating to, based upon or in any way connected to my participation in such Sanctioned Activities.

2) I do hereby give my consent for emergency medical care prescribed by a duly licensed Doctor of Medicine or Doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve the life, limb or well-being of my dependent.

3) No refunds will be given once the program has begun. Only partial refunds will be given once your application has been accepted. You must request your refund in writing directed to Leslie Harris at Leslie@rsfsoccer.com.

Print Name of Parent/Legal Guardian _____ Signature of Parent/Legal Guardian _____ Date _____

Make checks payable to RSF Soccer and mail your form to:
Rancho Santa Fe Attack Soccer, P.O. Box 1373, Rancho Santa Fe, CA 92067.
If you have any questions, please call (760) 479-1500.

Date Received: _____ Office Use
Check #: _____ Amount: \$ _____