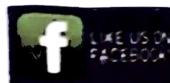




SOCCKER BOOT CAMP



DEBRIEFING

Soccer Boot Camp (SBC) is designed to give athletes (soldiers) at every will level an opportunity to get better during their off session. Camp is built around learning to love the game on and off the field - our goal is to educate soldiers (athletes) on every aspect of the game.

Each Soccer Boot Camp (SBC) participant will start as a Private and have the ability to work up to a General.

DATES: JULY 13th - JULY 16th, 2025

TIME: 8:15AM - 4:30PM

COST: \$100.00

Participants are expected to attend all 4 days for the entire session. Missing days will result in a lower rank at the end of the camp. Any missing soldier will be considered AWOL. NO REFUNDS WILL BE GIVEN.

To sign up go online or complete the form below and mail to:

OYS, & PO Box 125,
Ontario, Ohio 44862.

WWW.OYSPORTS.COM

Make checks payable to: Ontario Youth Sports

WE WANT YOU!
LIMITED SPACE - CALL A RECRUITER TODAY!
DEADLINE TO SIGN UP IS: JULY 11TH, 2025
QUESTIONS CALL: (419) 566-8072

BEANS, BUNKERS & BAND-AIDS

"GENERAL REFERENCE TO SUPPLY ITEMS, I.E. FOOD, EQUIPMENT, AND MEDICAL SUPPLIES"

BEANS: Each soldier will be required to pack a lunch and one snack for the day. Plenty of water and or Gatorade are also a must.

BUNKERS: Each soldier should come ready to play soccer, cleats / thin pads / soccer ball / are an absolute must. Each soldier will also be asked to bring a legal notepad and pen or pencil to take notes with. You may want to plan on sun block for your soldier.

BAND-AIDS: Staff will be onsite to assist with minor injuries such as twisted aubles / bee stings etc....

SOLDIER'S INFORMATION

SOLDIER'S FIRST NAME			SOLDIER'S LAST NAME		
AGE	WEIGHT	HEIGHT	BIRTHDATE	T-SHIRT SIZE (please circle one): YS YM YL YXL AS AM AL AXL	

KNOWN MEDICAL ISSUES/MEDICATIONS

PARENT/GUARDIAN INFORMATION (ALSO PRIMARY EMERGENCY CONTACT)

PARENT/GUARDIAN FIRST NAME			PARENT/GUARDIAN LAST NAME		
PHONE			EMAIL		
STREET ADDRESS					
CITY			STATE	ZIP	

SECONDARY EMERGENCY CONTACT (MUST BE DIFFERENT THAN PRIMARY CONTACT)

EMERGENCY CONTACT	EMERGENCY CONTACT PHONE
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Acknowledgement of Risk and Release of Liability

In consideration of Ontario Youth Sports, Inc. - Ontario Local School District and Kenneth Spencer for providing a soccer camp the undersigned, individually and as parent or legal guardian, does hereby release, indemnify, and discharge Ontario Youth Sports, Inc., its officers, coaches, and appointees from any and all claims, liabilities, and damages related to bodily injury or sickness and property damage sustained by the above child resulting from his/her participation, practice, play or travel to and from play or practice in the OYS soccer program. I, the undersigned parent/legal guardian of the player named above, agree that I and the player will abide by the camp rules as defined by the camp director and distributed the first day of camp. I have indicated any medical conditions above which I feel the camp should be informed.

PARENT/GUARDIAN (PRINT):	PARENT/GUARDIAN (SIGNATURE):	DATE:
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