



Rio Vista Football Club Summer Camp Series 2008

June 2-6: Jewish Community Center (half day & full day camps) – call Jacob for details 348-4466

June 9-13: @ Arroyo Del Oso Park
Soccer School Camp (U7-U8) \$60/\$70 – 9-10am
Goalkeepers (U9-U14) \$70/\$80 – 9-10.30am
U9-U10 Player Camp \$75/\$85 – 10-11.30am

July 7-11 & July 14-18: @ Arroyo Del Oso Park - 9-11am
High School Preparation Camp (Boys & Girls U15-18) \$125/\$150 for both weeks

July 14-18: High School Goalkeepers Camp (Boys & Girls U14-18) \$80/\$90

July 28-Aug 1: @ Arroyo Del Oso Park
Soccer School Camp (U5-U6) \$60/\$70 – 9-10am
Soccer School Camp (U7-U8) \$60/\$70 – 9-10am
U9 RVFC Player camp \$75 – 5.30-7pm (boys & girls)
Team camps

Aug 4-8: @ Arroyo Del Oso Park
U10 RVFC Player camp \$75 – 5.30-7pm (boys & girls)
Goalkeepers (U11-U14) \$70/\$80 – 5.30-7pm
Team camps

Aug 11-15: @ Arroyo Del Oso Park
Team camps

*** Prices listed are for RVFC members / non members***

Name _____ U - _____ Gender _____
Address _____
Club/Team _____ Parent/GuardianName _____
Emergency contact # _____ E-mail _____
Camp Type (Player /Goalkeeper/Developmental) _____ T-Shirt Size _____ Camp Date _____

Please make all checks payable to "Rio Vista F.C."
Mail Check with registration to: 7515 Tricia NE, Albuquerque, NM 87113

Players must bring the following: Own ball, water and appropriate soccer gear.
Enrollment is on first come first served basis.

I verify that my child has been checked by a licensed physician and is physically able to participate in the sports camp. I agree to allow my child to be treated by a licensed physician while attending, if necessary, and to assume all costs related to such treatment. I authorize my insurance company to pay benefits. Also, I authorize the disclosure of medical information to my insurance company for the purpose of the claim. I understand that if this application is accepted, there is no refund of the deposit if we (parent or child) should cancel the application later. Hold Harmless Agreement: I and my heirs hereby release Rio Vista F.C. and employees, officers, and agents from any liability for damages to or loss of personal property, sickness, and injury from whatever source, legal entanglement, imprisonment, death, loss of money etc., for which the camp is not culpable, which might occur while participating in this camp.

Parent's/Guardian's Signature: _____ Date: _____

If the participant is not a registered Rio Vista F.C. player please ensure the team coach signs the coach release below.

I _____ coach of _____ Soccer team give permission for my player to take part in the Rio Vista F.C. Summer Camp Series. Signature : _____ Date: _____