



**Rio Vista Football Club Summer Camp Series 2010**

**June 1-4:** Jewish Community Center (half day & full day camps) – call Tom for details 348-4466

**June 7-11:** @ Arroyo Del Oso Park  
Soccer School Camp I (U5-U6) \$60/\$70 – 9-10am (boys & girls)  
Soccer School Camp II (U7-U8) \$60/\$70 – 10-11am (boys & girls)  
Finishing/Goal Scorers camp (U9-U12) \$75/\$85 – 9-11am (boys & girls)

**July 5-9 & July 12-16:** @ Arroyo Del Oso Park - 9-11am  
High School Preparation Camp (Boys & Girls U14-18) \$125/\$150 for both weeks  
High School GK camp (Boys & Girls U14-18) \$80/\$90 (2<sup>nd</sup> week only)

**July 26-30:** @ Arroyo Del Oso Park  
Soccer School Camp I (U5-U6) \$60/\$70 – 9-10am (boys & girls)  
Soccer School Camp II (U7-U8) \$60/\$70 – 10-11am (boys & girls)

**Aug 2-6:** @ Arroyo Del Oso Park  
U9 & U10 Girls Camp \$75/\$85 – 5.30-7pm  
U9 & U10 Boys Camp \$75/\$85 – 5.30-7pm  
U9 & U10 GK Camp \$75/\$85 – 5.30-7pm

**Aug 9-13:** @ Arroyo Del Oso Park  
U11-U14 Girls Camp \$75/\$85 – 5.30-7pm  
U11-U14 Boys Camp \$75/\$85 – 5.30-7pm  
U11-U14 GK Camp \$75/\$85 – 5.30-7pm

**Aug 9-13:** Jewish Community Center (half day and full day camps) – call Tom for details 348-4466

**Team camps are available throughout the summer – please contact Chris Brennan to arrange (401-2870)**

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

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Name \_\_\_\_\_ U - \_\_\_\_\_ Gender \_\_\_\_\_  
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: 9010 Hendrix NE, Albuquerque, NM 87111**

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: \_\_\_\_\_