

**Top Flight Soccer Academy presents the 2010**  
**Southern Village Soccer Camp**  
**Individual Registration Form**

**DIRECTIONS:** Complete registration form and consent, rules, & medical forms. Mail forms with payment to:  
**SV Soccer Camp, 910 Edgewater Circle, Chapel Hill, NC 27516**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_ Grade in school next fall: \_\_\_\_  
 Primary Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_ (Email is our main contact tool)  
 Parent(s)' name(s): \_\_\_\_\_

**Step 1: Check Camp Session** (✓)      Ages      Hours      Early Bird Fee (2 weeks)      Regular Fee

**Session I: June 21-25**      **5-12**      **9- noon**      **\$120** (before June 7)      **\$140** (after June 7)

**Step 2: Circle T-Shirt Size:**    Youth Small    Youth Medium    Youth Large    Adult Small    Adult Medium

**Step 3: Would you like to pre-order a camp ball for \$20?**    YES / NO

**Step 4: Statement of Consent:**  
 I/We, the undersigned, hereby certify that I/We, am/are the parents or legal guardians of the participant on this form. I/We hereby give permission for the camp staff to seek, during the period of camp, appropriate medical attention for the participant, for the attention to be given to the participant, and for the participant to receive the medical attention and treatment including that which is not covered by the Academy's excess medical coverage policy and including the Academy's policies deductible.

I/We, the undersigned, understand that soccer is an active, physical sport and that injuries can occur. I/We assume all known and unknown risk of injury to my/our son. I/We also understand that there will be more participants than Academy staff at the Academy. I/We hereby acknowledge that my/our son is physically fit and mentally capable of participating in soccer and all Academy activities.

I/We, the undersigned, hereby acknowledge and understand the Top Flight Soccer Academy is a privately run sports camp and is not operated by or through Southern Village. The camp is neither sponsored, controlled, nor supervised by Southern Village, but rather is under the sole sponsorship, control, and supervision of the Hasenpfeffer, Inc., t/a Top Flight Soccer Academy.

I/We hereby also give permission to Top Flight Soccer Academy and its directors to use any photographs taken of my son during soccer related camp activities as they see fit. This includes promotional items such as camp brochures, camp website, etc.

I/We waive, release, and discharge the Top Flight Soccer Academy, Oliver Weiss, Southern Village, Southern Village Club, and the aforementioned staffs, officers, agents, employees, representatives, successors, and assigns for any and all liability claims, demands, actions, and causes of action whatsoever arising out of or related to any loss, personal injury or property damage that may be sustained or occur during the participation and Academy activities or while at the Academy.

**Step 5: Rules Agreement:**  
 By signing below you and your son acknowledge, understand, and agree to abide by the rules of the Academy. Violating these rules may result in immediate dismissal from the Academy without a refund.

1. Campers shall not bring dangerous objects or pets to camp.
2. Academy participants shall only be present in locations designated as Academy grounds such as designated soccer fields, restrooms, and shelter providing facilities.
3. Bullying, intimidation, or abusive behavior toward any person(s) is not permitted.
4. No participants shall destroy property or engage in reckless behavior.
5. Academy participants must follow the directions of Top Flight Soccer Academy staff at all times.

My/our signature(s) indicate(s) that I/We have provided true information on application, rules agreement, medical information, and consent forms and understand all statements on these forms.

**Step 7: Confirmation:**  
**After successful registration, you will receive an email confirmation with camp details, what to bring, and arrival information.**

**Questions?**  
 You can email or call us at 919-886-0005 or question@topflightsocceracademy.com

Signature(s) of Parent(s) or Legal Guardian(s) \_\_\_\_\_ Date \_\_\_\_\_  
 Signature(s) of Parent(s) or Legal Guardian(s) \_\_\_\_\_ Date \_\_\_\_\_

**Special Note:**  
**Please know that the camp is limited in the # of kids it can accept into camp. Campers are accepted on a first-come, first-serve basis.**

**Step 6: Medical Information:**  
 Name of Insurance Company: \_\_\_\_\_  
 Policy Holder's Name: \_\_\_\_\_  
 Policy #: \_\_\_\_\_ Group #: \_\_\_\_\_  
 Special Instructions: \_\_\_\_\_  
 Date of last Tetanus shot (Year)? \_\_\_\_\_ (must be up to date)  
 List all medical conditions (i.e.: asthma, diabetes, allergies, injuries, etc.) \_\_\_\_\_  
 List all medications participant is bringing to the Academy (i.e.: inhaler, Tylenol, prescriptions, etc.) \_\_\_\_\_  
 Will participant self-administer medication? \_\_\_ YES \_\_\_ NO

**FIELD LOCATION:**  
 Central Park Field, Southern Village (right next to swimming pool)

**Payment Calculator**

Camp Fee (\$120 or \$140): \_\_\_\_\_  
 Camp Ball (\$20): \_\_\_\_\_  
 Total Camp Fees: \_\_\_\_\_

*Make check out to:*  
**Top Flight Soccer Academy**

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**Mail form to:**        **SV Soccer Camp, 910 Edgewater Circle, Chapel Hill, NC 27516**

**FOR OFFICE USE ONLY:**  
 Rec'd: \_\_\_\_\_ Check# \_\_\_\_\_ AMT: \_\_\_\_\_