



2nd Annual CUNE | Youth Soccer Clinic

Hosted by Bulldog Women's Soccer

When: Saturday April 1st, 2017

Where: Bulldog Stadium

Time: 10:00am-11:30am

Cost: No Charge

Who: Boys & Girls, Ages:
Pre-K through 6th Grade
(entering Kindergarten in Fall 2017)

*Please bring a soccer ball (if you have one)

Registration due: Thursday, March 30th, 2017

Send registration & release form to:

Daniel Ball, Women's Soccer Assistant Coach

Daniel.ball_ga@cune.edu

Or by mail to:

Concordia University, Nebraska
Attn: Women's Soccer: Youth Clinic
800 N. Columbia Ave.
Seward, NE 68434

CUNE—Community
Soccer Day

10am: Youth Clinic

2pm: CU Women's
Soccer Scrimmage

* Free Admission*





MEDICAL AUTHORIZATION AGREEMENT AND RELEASE

Student's Name (Camper) _____ Camp (circle one): Baseball Basketball Cheer Dance
Football Soccer Softball Track
Volleyball Wrestling

Parent's Name(s) _____

In an Emergency Notify:

Name _____

Relationship _____

Cell Phone # _____ Daytime Phone # _____

Known Allergies: _____

Known Medical Conditions: _____

List of Medications: _____

Medical Insurance Company Name & Policy # _____

Policyholder's name _____

I verify that _____ ("Camper") has been examined by a qualified medical provider and is physically capable of participating in the Camp described in the camp brochure and/or online at www.cune.edu/sportcamps. I hereby request you to accept the application for enrollment of Camper for the Camp, and in consideration of your acceptance of the application, we will hereby release Concordia University, Nebraska, its agents and employees from all claims on account of any injuries that may occur while Camper attends Camp, and we agree to indemnify the University, its agents and employees for any claim arising out of or relating to Camper's attendance at Camp. In addition, we authorize all medical and/or surgical treatment that is reasonably necessary to care for Camper while attending Camp.

Parent or Guardian Signature _____ Date _____