

(888) 436-GOAL



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www.Goose22.com

(734) GOOSE-22



# Why Goose's All-Star Soccer Camps?

- \* We have 15 years of experience.
- \* All of our coaches are licensed trainers working with local teams.
- \* Our instructor to child ratio is 1:10.
- \* We provide a structured camp with a daily schedule.
- \* Our coaches have playing experience, from collegiate players to professionals.

**Daily Schedule: Monday-Dribbling, Tuesday-Passing, Wednesday-Team Concepts and the very popular Water Fight Wednesday, Thursdays-Trapping, Passing, and Finishing with shooting demonstrations from the coaches, and Friday-Soccer Olympics and World Cup games.**

For more information on our staff, visit our website at [www.Goose22.com](http://www.Goose22.com).

## HURON SOCCER ASSOCIATION CAMP

**DATE: August 14-18**

**LOCATION: BIG BEND SOCCER FIELD AT WILLOW METRO PARK**

**TIME: 9:30 AM - 12 PM**

**COST: \$99/PLAYER (INCLUDES \$40 DISCOUNT PLUS FREE BALL AND T-SHIRT!)**

**AGES: 5-14**

**For more info, please call (734) GOOSE-22  
or visit us online at [www.Goose22.com](http://www.Goose22.com)**

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### REGISTRATION FORM

Parent/Guardian: \_\_\_\_\_ Daytime Phone: ( ) \_\_\_\_\_  
 Address: \_\_\_\_\_ Evening Phone: ( ) \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Camper Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Camp Number: \_\_\_\_\_ Camp Date: \_\_\_\_\_ Camp Fee: \$ \_\_\_\_\_

Camper Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Camp Number: \_\_\_\_\_ Camp Date: \_\_\_\_\_ Camp Fee: \$ \_\_\_\_\_

E-mail: \_\_\_\_\_ Subtotal: \$ \_\_\_\_\_  
 Handling: \$3.00 \_\_\_\_\_  
 Total Enclosed: \$ \_\_\_\_\_

Please return this form along with payment to:  
**Goose's All-Star Soccer Camps**  
 46245 Michigan Avenue, Suite 300  
 Canton, MI 48188

Please make checks payable to:  
**TOP GUN SPORTS MANAGEMENT**  
 All Credit/Debit cards will be run through  
 High Velocity Sports

Please Charge my: Visa Mastercard  
 #: \_\_\_\_\_  
 Exp. Date: \_\_\_\_\_  
 Name on card: \_\_\_\_\_

### WAIVER AND RELEASE. MUST BE COMPLETED AND RETURNED WITH PAYMENT.

I understand and agree Top Gun Sports Management, L.L.C. dba Goose's All-Star Soccer Camps ("Program") in which I am enrolling my child involves strenuous physical activities and should be engaged in only by persons in good health. I understand and agree that neither Program instructors nor those arranging the Program are qualified to determine my child's physical condition or health and that it is my responsibility to consult a physician prior to my child's participation in this program. I further understand and agree that my child may decline to participate in any particular activity or exercise, which he/she feels is beyond his/her ability. I hereby agree, for myself and my child and our respective heirs, assigns and legal representatives, to indemnify, defend and hold Top Gun Sports Management, L.L.C. dba Goose's All-Star Soccer Camps and its directors, board members, employees, agents, independent contractors and other participants in the Program ("Releases") harmless from any and all claims and causes of action of any nature for any and all personal injury or illness, including death, which may occur to my child or which may be aggravated during or by any activity during the course of the Program in which I have decided to allow my child to engage. I further waive any and all claims or causes of action which my child may now or hereafter have against Releases which may at any time arise as a result of any act or thing occurring in or arising out of my child's participation in the Program. I further expressly understand and agree the foregoing indemnify, release and waiver is intended to be as broad and inclusive as permitted by the law of the State of Michigan and that any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full force and effect. I represent that my child is covered under a qualified health and medical insurance plan. The undersigned, \_\_\_\_\_ parent and natural guardian or legal guardian of \_\_\_\_\_, does hereby represent that he/she is, in fact, acting in such capacity and agrees to indemnify, defend to save and hold harmless each and all of the Releases from all liability, loss, costs, claim or damage whatsoever.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Top Gun Sports Management  
46245 Michigan Avenue  
Suite 3000  
Canton, MI 48188

**HURON SOCCER ASSOCIATION RECREATIONAL SOCCER CAMPS!**

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