Medical Release Form

Camper:
Date of Last DPT/DT or Tetanus Booster:
Insurance Company Information
Name:
Policy#:

I approve of my child being at Goal to Goal Soccer Camps @ Florida Atlantic University, and I certify that he is in good health and able to participate in the program activities. I authorize the staff of Prime Soccer Enterprise to act for me according to their judgment in an emergency requiring medical attention, including treatment by physicians.

By signing below, I hereby assume any and all risks, which are incumbent with any excursion of program, and extra-curricular activities in which my child might participate; with realization these activities may subject him to personal bodily injury or property damage risk. I am aware that certain dangers may occur including, but not limited to physical contact with other individual and/or athletic equipment and facilities which may result in cuts, abrasions, sprains, bruises, concussions and fractions. Being fully aware of these dangers, I nevertheless, voluntarily choose to allow my child to participate in soccer camp and I assume all risks arising therefrom.

I so hereby release, acquit, and forever discharge Prime Soccer Ent., the State of Florida, the Florida Board of Regents, Florida Atlantic University, and all employees and/or agents of Florida Atlantic University who plan direct, or otherwise participate in the aforementioned program, and from all actions, account of any and all injury, directly or indirectly sustained by my child as a consequence on his participation in the above mentioned athletics sports camp.

I will be responsible for any other charges in connection with attendance at camp. I have read and understand the foregoing assumptions of risk and release document, and I do freely accept its terms.

Parent/Guardian:
Signature: Date:

Goal to Goal Soccer Camps @
Florida Atlantic University

Winter/Holiday Sessions (Weekly Sessions)

***Winter Day Camps***
9am – 12pm(Half day)
9am – 3pm(Full Day)
Boys & Girls Camp, Ages 5 – 13

- Early Drop off available @8am
- *Lunch included
- *No After-Care service provided during holiday camps
- Daily rates Available Only by paper registration

Tel: 561 297-3711
Fax: 561 297-0142
Email: Donev@fau.edu
Online Registration @ goaltogoalsoccercamps.com