

2010 Lansing Recreation Annual Soccer Camp



Date: August 9^h-13th

Time: 8:30-4:30

Location: Town Hall Fields

Ages: Boys and Girls entering grades 4-10

Cost: \$90

Camp Director Adam Heck is the Boys Varsity Soccer Coach at Lansing High School. He is entering his 14th season as a varsity coach. During his thirteen years at Lansing Coach Heck has guided his teams to 12 straight winning seasons, consisting of over 190 victories, six division titles, two league championships, 4 sectional titles, one regional title, 1 state finalist, and 9 top twenty final state rankings. Coach Heck was named New York State Coach of the Year for 2007. In 2006 his Empire State Game's Scholastic Boys Soccer team won the gold medal.

The staff will consist of highly qualified coaches and players ranging from college coaches and players to high school coaches and players. The camp offers young players the chance to improve their overall game. Both offensive and defensive skills and strategies will be taught, as well as a separate keeper training session for those interested in that area. There is no question that this camp will teach the fundamentals of the game. Every day there will be a guest speaker ranging from all levels of soccer (including male and female coaches and players). At the end of the week each camper will receive a **camp T-shirt**.

***Each camper is responsible for bringing cleats, shin-guards, water and lunch.**

Registration

Name: _____ T-Shirt Size: _____

D.O.B. _____ Age: _____ Grade: (fall'10): _____

Address: _____

Parent's Name: _____

Home Phone: _____ Work Phone: _____

E-mail: Address: _____

***Person to contact in emergency, (other than Parent or guardian):**

Name: _____ Phone: _____

Family Physician: _____ Phone: _____

***Medical Problems/Conditions:** _____

-I hereby give permission for my child to participate in the program designated and in the event of illness or injury, to be treated by emergency personnel or at a local medical facility. I also agree not to hold the Town of Lansing or anyone associated with the program liable for any injury or illness as a result of participation in this program.

Parents Signature: _____

(Checks payable to Lansing Recreation)

Return to:

**Lansing Recreation Department
29 Auburn Rd.
Lansing, NY 14882**