



British Elite Soccer Training

British Elite Soccer Training brings together the highest level of coaching and game enjoyment to give our players the BEST soccer experience.

Our coaches will help these players have a productive, FUN-based introduction to the game of soccer. The curriculum is based upon introducing these younger players to fundamentals of the game through involvement in a series of FUN-based adventure practices and small sided games.

Coaching Staff

Our coaches are acclaimed for their knowledge and ability to create environments that promote development and understanding:

- Nationally and internationally qualified
- Experienced players and skilled demonstrators
- Experienced teachers
- Passionate soccer enthusiasts
- Positive role models and leaders
- Professionally screened and background checked

British Elite Soccer Training proudly presents:

Dearborn Soccer Club

Mini Camp

July 19-23 @ Crowley Park

9am-10:15pm, ages 3-5, \$65 per player

Registration information:

Please send registration form and total amount due to:

British Elite Soccer Training

PO Box 1063, Ann Arbor, MI 48106

Any questions? Please call Andy @ 1 734 904 1913

Camp: **Dearborn Mini camp**

Dates: **July 19-23**

Time: **9am-10:15am**

Players Name: _____ Age: _____ Date of Birth: _____ Player's Sex: M F (circle)

Parent/Guardian Name: _____ Address: _____

City: _____ State: _____ Zip: _____

Phone: Home (_____) _____ Work/Cell (_____) _____

E-mail Address: _____ T-shirt Size: YM YL AS AM AL XL (please circle)

Sign up 2 weeks prior to start date and get **YOUR NAME** on the back of your T-shirt.

Name to appear on T-shirt: _____ (PLEASE PRINT, Max 10 letters)

I certify that my child is in excellent health and may participate in strenuous physical activities including soccer. I agree to defend and hold British Elite Soccer Training, its servants, agents and/or employees and contractors harmless from any and all claims for injuries sustained by my child during his or her participation in soccer training. Permission is granted for my child to receive emergency medical treatment, if needed, and I certify that there are no limits to my child's participation except as stated in writing and included with this waiver.

Parent/Guardian Signature: _____ Date: _____