



Mail this form to:  
Dallas Texans  
2013 Wing Point Lane  
Plano, Texas 75093

## 2010 Summer Soccer Camp Registration & Release Form

Players Name: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender \_\_\_\_\_

Phone: \_\_\_\_\_ Cell or work \_\_\_\_\_

Address: \_\_\_\_\_

City and State: \_\_\_\_\_ Zip \_\_\_\_\_

E-mail address: \_\_\_\_\_

### Select Camp

Camp	Dates	Times	Total Camp Fee	Deposit
<input type="checkbox"/> North	June 1-4	6:00p-8:00p	80.00	25.00
<input type="checkbox"/> South	June 4 (&)	6:00p-8:00p	50.00	25.00
	South June 5	9:00a-12:00p & 1:00 p-3:00p		
<input type="checkbox"/> Dallas	June 21-25	6:00p-8:00p	100.00	25.00
<input type="checkbox"/> WTX	June 21-24	5:00p-7:00p	80.00	25.00

(Check or money order payable to the Dallas Texans Soccer Camps)  
**No pro-rated daily payments – No refunds**

### Liability Release and medical Authorization

The above named camper is in good health and has my permission to participate in the Dallas Texans Soccer Camp. In case of emergency, I grant permission for my child or ward to receive emergency treatment. In consideration of the acceptance of my child or ward to the Dallas Texans Soccer Camp, I hereby, for myself and my child or ward, release the Dallas Texans Soccer Club, its affiliates and its respective coaches, employees, officers, directors, agents, officials, volunteers, sponsors and owner of the facility from and against any liability claims or demands for any injury illness or death incurred at or arising by virtue of participation in the Dallas Texans Soccer Camp. I also, for myself and my child or ward assume complete financial responsibility for any personal injury or property damage created as a result of an intentional or neglectful act of my child or ward as he/she is participating in the Dallas Texans Soccer Camp.

