



2020 WILDCAT SOCCER CLINIC
Session #1 June 22-24, Session #2 August 19-21
4 - 7 p.m. Fontaine Field - Norwich
For boys & girls ages 8 -18

LEARN TO PLAY THE GAME OF SOCCER 'INTERNATIONAL STYLE'

OBJECTIVES

- To instill the fundamentals of soccer
- To improve self-esteem and confidence
- To experience an authentic soccer atmosphere, including conditioning, drills, skills, ball control, scrimmages, shooting practice, goalkeeper training, and fun games

STAFF

- Robert Briones, Director
Head Varsity Soccer Coach, NFA
- Alex Cabezas
Assistant Varsity Soccer Coach, NFA
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Campers should bring a snack and a drink each day (Please no glass!). Players should wear soccer equipment and bring their own soccer balls. Please label ALL equipment.

Please fill out all the forms in this packet and remit payment.

TUITION: \$130 (due by August 10, fee is non-refundable)
Make checks payable to: NFA

MAILING ADDRESS: Norwich Free Academy
Attention: Robert Briones
305 Broadway
Norwich, CT 06360

QUESTIONS? Contact Coach Robert Briones at brionesr@nfaschool.org
(Subject: NFA SOCCER CAMP)



2020 Wildcat Soccer Clinic Registration Information

Name _____

Birthdate _____ Age _____ Grade _____

Address _____

Current School _____

Parent/Guardian Name _____ Ph:# _____

Emergency Contact Name _____

Phone #: _____

Which session would you like to attend? : _____



NORWICH FREE ACADEMY

Wildcat Soccer Clinic – MEDICAL INFORMATION

Student's Name: _____ Date of Birth: ___/___/___ Gender: _____

Student's Address:

Street _____ City _____ State _____ Zip _____

Parent/Guardian Name: _____
First Name _____ Last Name _____ Relationship _____

Parent/Guardian Phone Number: _____ Parent/Guardian Email: _____

Pertinent Medical History:

Please list any allergies your child may have:

Does your child require any emergency medication (circle): YES NO

Please list any medication(s) your child is currently taking and reason for medication:

Current health problems/concerns:

Special precautions you wish the school to know concerning your child:

***NORWICH FREE ACADEMY MAY CALL 911 FOR TRANSPORT TO NEAREST HOSPITAL IN THE EVENT OF AN EMERGENCY.**

My signature indicates that I have read and agree to NFA's terms and conditions about medical emergencies and that the medical information that I have provided is accurate and complete.

Parent/Guardian Signature

Date

PROVIDING OPPORTUNITIES... PREPARING LIVES



NORWICH FREE ACADEMY

Public Relations/Student Names and Images

We often use images, photos, and/or video of our students on our website and in our promotional materials, publications, advertisements, and social media. In some cases, we may use a student's name as well as a photo.

I, _____, **grant / do not grant** Norwich free Academy to use images, photos, and/or video of my child and his/her name on the Academy's website and in promotional materials, publications, advertisements, and social media.

CHILD'S FULL NAME

GRADE

PARENT/GUARDIAN SIGNATURE

DATE

PARENT/GUARDIAN (please print)

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