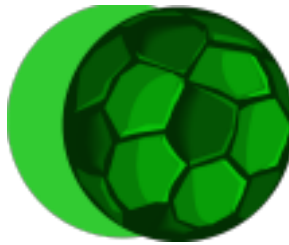




## -Future Falcons Summer Soccer Clinic-



**Details:** Saint Joseph Head Varsity Soccer Coach, Sam Roca, and the rest of the Saint Joseph Soccer Coaching Staff would like to invite **ALL** boys and girls soccer players to participate in a FREE soccer clinic. You will get to meet the coaches, players, learn some new skills, and have fun while doing it!

**Where:** Saint Joseph High School ( Metuchen ) - 145 Plainfield Ave. Metuchen , NJ 08840- Grass Varsity/ JV fields. ( Behind School)

**When:** Four Dates \* Please let us know which dates your son/ daughter will be attending.

- Friday Night, June 3rd 2022 6:00-7:00pm ( GRASS)
- Monday Night, June 6th 2022- 6:00pm-7:00pm ( GRASS)
- Friday Night, June 10th 2022 - 6:00pm-7:00pm ( GRASS)
- Monday Night, June 13th 2022 - 6:00pm-7:00pm ( GRASS)

**Participants:** Any boy or girl ages 5-13- all levels welcome \*

\*\*\*If you plan on attending please email the SIGNED WAIVER FORM and CONTACT INFO to Assistant Varsity Coach, Charles Neri , via email at [cneri@stjoes.org](mailto:cneri@stjoes.org) so we can have a proper head count for the sessions.. Thank you and hope to see you there!

**-Future Falcons Summer Soccer Clinic- -Waiver**

**WAIVER/RELEASE : INCLUDING COMMUNICABLE DISEASES\* COVID-19**

I understand that participation in the Future Falcons Summer Soccer Clinic ,which is sponsored by the Saint Joseph Boys Soccer Program, involves a certain degree of risk that could result in injury, sickness, or damage to person or property. After carefully considering the risk involved, I hereby release, hold-harmless and waive all claims associated with this activity which I may have against the Saint Joseph High School, Saint Joseph Boys Soccer Program, Future Falcons Soccer Clinic Staff, Partners in Mission and any organizations /agents /volunteers associated with this program. Further I agree to abide by all the rules and regulations associated with the Future Falcons Soccer Clinics, CDC, and NJ.Gov.

\_\_\_\_\_ Player Name (Print)  
Player Signature

\_\_\_\_\_ Parent's Name (Print)  
Parent's Signature\*

\_\_\_\_\_ Day of \_\_\_\_\_, 2022

Parent/ Guardian Email: \_\_\_\_\_

Parent/ Guardian Cell #: \_\_\_\_\_