

Attire:

***Proper Soccer Gear is required:**

Soccer shorts, tee shirt, shin guards, soccer socks, soccer cleats, indoor soccer shoes or sneakers and GK gloves for Goalkeepers. All campers must bring water, a healthy snack, hand sanitizer, and sunscreen

Registration: Please Complete Google Form or mail this completed form to Sam Roca 17 Tall Oaks Drive Wayne, NJ 07470.

Or email completed form to
sroca@stjoes.org

Cost/Payment:

One Week:

- \$235 Per player
- (Sibling Discount:\$195 per player)

Two Weeks:

- \$375 Per player
- (Sibling Discount: \$335 per player)

*Payment:

Cash or Check accepted
Make checks payable to
CASH
17 Tall Oaks Drive Wayne,
NJ 07470

Once received email confirmation will be sent



Dark Stars Elite Soccer:

Our mission is to provide a positive learning experience while enriching players' soccer skills.

COVID

We will continue to abide by all CDC and NJ.gov mandates to insure the safety of our players, their families and our staff. We are fortunate to have multiple outdoor fields that help make this possible!
Please stay safe!

Contact Us:

Dark Stars Elite Soccer, LLC
17 Tall Oaks Drive, Wayne NJ
07470

Email:sroca@stjoes.org



- Dark Stars Elite Soccer Camp -



- **LOCATION:** Saint Joseph High School- TURF and GRASS Soccer Fields- 145 Plainfield Ave. Metuchen, NJ 08840
- **DATE:** July 8th-11th (Week 1- Mon.-Thurs.)
- **DATE:** July 22nd-25th (Week 2- Mon.-Thurs.)
- **TIME:** 9am-1:30pm (Rain or Shine)
- **CAMPERS:** Boys: Ages 5-18*
- **CAMPERS:** Girls: Ages 5-14*

-Owner/Director: Sam Roca:



Camp Agenda:

- -Check-In: 8:45 AM- 9:05AM
- -Warm up: 9:05 AM -9:25 AM
- - Session Topic Focus: 9:25 AM-11:00 AM
- -Snack/Lunch break: 11:00 AM-11:40 AM
- -Games : 11:45 AM-1:00 PM
- -Cool down / clean up : 1:15 PM

Camper Info:

Pre-Professional Player :

- Former Red Bull Academy player and captain
- Former 4 year Wayne Valley HS Varsity player and captain. ***Week of Camp: 1 / 2 / BOTH (Circle choice)**
- (2 year Captain, 1st Team All League, All County, & All State-Regional All American (named to Passaic County All Decade Team)
- Former Division 1 Collegiate player at University of South Carolina (named top 100 freshman to watch) and High Point University

-Club Team: _____

-Position: _____

Professional Player:

- Sweden: Ytterhogdal IK - (Vice Captain Newcomer of theYear)
- Canada: Capital City FC - (2nd place in CSL 1 division championship)
- York Region Shooters SC (Captain)
- USA: Kitsap Pumas SC (named to PDL national team of the week twice, Won PDL National Championship)
- Ironbound Soul SC - (Vice Captain)

-Name: _____

-Age: _____

-Shirt size: _____

-Address: _____

Coaching:

- USSF F/E/D/ and C Licenses
- Saint Joseph HS Boys Varsity Soccer Head Coach
- RBNY Youth Coach
- FC COPA USL 2 - First Assistant Coach
- FC COPA USL Reserve Team- Head Coach

-Emergency Contact: _____

-Email: _____

Staff:

SJ coaching staff, Elite ***College Coaches,**
Former ***Professional Players,** & other highly
qualified ***NJ High School Soccer Coaches.**

-Cell #: _____

-Allergies: _____

Photo Release: I agree that photos taken of my child at Dark Stars Elite Soccer, LLC Camp may be displayed on future websites, brochures, & flyers. **Yes__ No__ (Parent/Guardian Initials _____)**

Liability/Medical Waiver: I hereby authorize the coaches/staff of Dark Stars Elite Soccer, LLC to seek medical emergency care for my child. I hereby assume all risks and hazards incidental to participating in the Dark Stars Elite Soccer, LLC Camp, and I do waive, release and absolve the Dark Stars Elite Soccer, LLC director, staff and participants for any claim arising out of injury to my child. I represent that I am the parent/guardian of the above named minor and I agree that the grant and release contained therein binds the minor and me to all its terms. I agree to assume complete financial responsibility for any personal injury to my child while attending Dark Stars Elite Soccer, LLC Camp.

COVID I acknowledge the contagious nature of the Coronavirus/COVID-19 and that the CDC and many other public health authorities still recommend practicing social distancing. I further acknowledge that Dark Stars Elite Soccer LLC has put in place preventative measures to reduce the spread of the Coronavirus/COVID-19. I further acknowledge that Dark Stars Elite Soccer LLC cannot guarantee that I/ my son will not become infected with the Coronavirus/Covid-19. I understand that the risk of becoming exposed to and/or infected by the Coronavirus/COVID-19 may result from the actions, omissions, or negligence of myself, son, and others, including, but not limited to, owner, staff, partners and other campers and their families. I / my child voluntarily seek services provided by Dark Stars Elite Soccer LLC and acknowledge that I am increasing my child's and my own risk to exposure to the Coronavirus/COVID-19. I acknowledge that I and my son must comply with all set procedures to reduce the spread while attending camp. I attest that: * I am, nor is my child, experiencing any symptoms of illness such as cough, shortness of breath or difficulty breathing, fever, chills, repeated shaking with chills, muscle pain, headache, sore throat, or new loss of taste or smell.

* My child has not traveled internationally within the last 14 days. * My child has not traveled to a highly impacted area within the United States of America in the last 14 days.* My child does not believe he has been exposed to someone with a suspected and/or confirmed case of the Coronavirus/COVID-19. * My child has not been diagnosed with Coronavirus/Covid-19 and not yet cleared as non-contagious by state or local public health authorities. * My child is following all CDC recommended guidelines as much as possible and limiting my exposure to the Coronavirus/COVID-19 I hereby release and agree to hold Dark Stars Elite Soccer LLC harmless from, and waive on behalf of myself, my son, my heirs, and any personal representatives any and all causes of action, claims, demands, damages, costs, expenses and compensation for damage or loss to myself and/or property that may be caused by any act, or failure to act of the owner /staff/partners , or that may otherwise arise in any way in connection with any services received from Dark Stars Elite Soccer LLC. I understand that this release discharges Dark Stars Elite Soccer LLC from any liability or claim that I, my son, my heirs, or any personal representatives may have against the camp/owner/employees/volunteers with respect to any bodily injury, illness, death, medical treatment, or property damage that may arise from, or in connection to, any services received from Dark Stars Elite Soccer LLC. This liability waiver and release extends to the company together with all owners, partners, and employees.

X _____
Parent/ Guardian Signature