



# Asaf Soccer and Sports Camp 2018

You can also register online at <https://www.asafsacademy.net>

## Participant Information

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First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Gender:  Male

Female

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

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

## Parent/Guardian Information

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First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

(Emergency contact) Names and numbers of the 2 people to call if you cannot be reached:  
(These people are authorized to pick up child)

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_



## Summer 2018 Rates

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Total # of Weeks	Regular Price	Early bird Price
1 week	\$250	\$225
2 weeks	\$500	\$450
3 weeks	\$750	\$675
4 weeks	\$1,000	\$900
5 weeks	\$1,125	\$1,000
6 weeks	\$1,350	\$1,200
7 weeks	\$1,575	\$1,400
8 weeks	\$1,800	\$1,600
9 weeks	\$2,000	\$1,800
10 weeks	\$2,000	\$2,000

\*Early Bird is defined as a camper who is paid in full before March 1, 2018

\*There are no refunds. Facility, Staff & Camp expenses are planned ahead of time and around the number of participants therefore no refunds can be issued.

- Multi-week discounts start at a minimum of 5 weeks and have to be paid in full. \* (Adding weeks at a later date will not receive the discount. Any new weeks may be added, but at the \$250 regular price)\*

## Select Sessions

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Please indicate which weeks your child will be attending:

- |                                     |   |  |                                    |
|-------------------------------------|---|--|------------------------------------|
| <input type="checkbox"/> June 4-8   | <input type="checkbox"/> June 25- June 29 | <input type="checkbox"/> July 16-20    | <input type="checkbox"/> Aug 6- 10 |
| <input type="checkbox"/> June 11-15 | <input type="checkbox"/> July 2-6         | <input type="checkbox"/> July 23-27    |                                    |
| <input type="checkbox"/> June 18-22 | <input type="checkbox"/> July 9-13        | <input type="checkbox"/> July 30-Aug 3 |                                    |

Total # of Weeks \_\_\_\_\_

\*no camp on July 4

## Before & After Care

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For campers in need of extended hours, we do offer before and/or after care each week throughout the summer.

- Before camp hours are 8-9am for \$50 per week
- After camp hours are 4-6pm for \$50 per week
- Campers enrolled in both before and after care will pay a reduced rate of \$75 per week

If interested, please send a separate check and mark the specific weeks on the check.



Child's age at Camp: \_\_\_\_\_

T-Shirt Size: Youth Small Youth Medium Youth Large Adult Small Adult Medium Adult Large  
(circle one)

How did you hear about us:

- |  |   |
|--|---|
| <input type="checkbox"/> Coach Asaf    | <input type="checkbox"/> Facebook                 |
| <input type="checkbox"/> Word of Mouth | <input type="checkbox"/> City Soccer              |
| <input type="checkbox"/> Flyer         | <input type="checkbox"/> Movie Theater Commercial |
| <input type="checkbox"/> Email         | <input type="checkbox"/> TV Commercial            |
| <input type="checkbox"/> Expo Center   |   |
| <input type="checkbox"/> Other _____   |   |

Were you referred by a friend? If so, please identify here: \_\_\_\_\_

My child has the following pre-existing illness or health concerns: \_\_\_\_\_

My child has the following allergies and is on the following medications: \_\_\_\_\_

Special Accommodations (My child has the following special needs): \_\_\_\_\_



# Waiver

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I/We hereby grant permission for ALSA to photograph and/or video tape the above named registrant during their participation in activities & share it for advertisement.

Yes  No

Participation in any ALSA activities and use of City Soccer LLC facilities involves a risk of accidental injury despite all safety precautions. Having been informed of the activities to be conducted by ALSA., we as an individual and/or as a parent and/or legal guardian of the participants named herein, assume all risks and hazards, incidental to the activities and release from all responsibility and agree to indemnify and hold harmless ALSA, it's staff & City Soccer, for any illness or injury to me or my children and/or family members occurring during their participation in any activities. ALSA and City Soccer are not responsible for any items lost at the camp facility.

I have read and agree to ALSA's policies & liability waiver.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Make a difference!! Are you interested in sponsoring T-shirts, medals, or snacks for the campers? Please mark your amount and send a separate check for the donation. Thank you!!  
(If your donation is company/business inspired, please make sure to send in your logo so that we may proudly display it on our camp T-shirts!)

\$0  \$500  
 \$50  \$1,000  
 \$100  \$1,500  
 \$300  other \_\_\_\_\_

Make a difference!! Are you interested in sponsoring a child from 1 week up to an entire summer at \$200 per week? Please mark the number of weeks and send a separate check for the donation. Thank you!

No thanks  5 weeks  
 1 week  6 weeks  
 2 weeks  7 weeks  
 3 weeks  8 weeks  
 4 weeks  10 weeks (entire summer)



## Payment Options

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**Mail Check to:**

**5237 Indianwood Village Lane**

**Lake Worth, FL 33463**

**Please make checks payable to: Asaf Lubezky Soccer Academy**

**Any additional questions please contact our office at: (561)-478-1644**

**Thank you for your business!**