



“SOCCER FUN WITH COACH JUAN”
SUMMER MINI SOCCER CAMP 2012

Date: June 18 through June 21, 2012
Age Groups: Boys and Girls U-7 to U-10
Training Sessions: Monday through Thursday from 9.00 a.m. until 12.00 Noon
Location: Summerfield Soccer Complex,
11942 Big Bend Road, Riverview, Fl 33579

Coach Juan E De Brigard

Coach Juan has more than 30 years of soccer coaching experience including First Division Teams in Colombia. He has coached many players who went all the way to the World Cup Level and is a seasoned Goalkeeper Coach. He holds the prestigious **Fussball Lehrer** Title of the German Football Federation, which is the equivalent of the UEFA Pro License Education.

Since his arrival in the Tampa Bay Area **Coach Juan** has educated hundreds of young soccer players through his involvement as a volunteer in Elementary Schools in Hillsborough County and through his coaching activities at local Soccer Clubs like Revolution, RSL and Baysl.

Coach Juan has designed a Summer Camp that is not crowded and that has a limited number of children, giving him the ability to address at all times the learning process of each participant. In other words your child will be in the environment of a private lesson enjoying the group experience.

Cost: \$125.00 per player

Only 14 players will be accepted on a First Come First Serve Basis

Last day to register: 06/ 15/ 2012

To register complete and detach the form below and mail it **with payment to:**

Florida Revolution

P O BOX 2580, Riverview, Fl 33568

Make checks payable to: Florida Revolution Soccer Club

E Mail: sgts@soccergoestoschool.org

Phone Info: Juan De Brigard at 754-244-3016

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Florida Revolution - “Soccer Fun with Coach Juan”
Summer Mini Soccer Camp 2012



NAME: _____ **SEX:** (circle one) Male Female

DATE OF BIRTH: _____ (MM/DD/YYYY) **AGE GROUP:** U-_____

HOME PHONE: _____ **E-MAIL:** _____

FATHER'S NAME: _____ **PHONE:** _____

MOTHER'S NAME: _____ **PHONE:** _____

I certify that my child is medically qualified to attend the Summer Mini Soccer Camp 2012. I hereby authorize the staff to act for me in my absence according to their best judgment in any emergency requiring medical attention. I give permission for a physician and/or hospital emergency room to administer emergency care. I waive and release Florida Revolution Soccer Club and its representative(s) and Coach Juan Enrique De Brigard and his representatives from liability for any injuries and illness incurred while at the Summer Mini Soccer Camp 2012.

Parent/Guardian (print): _____ **Signature:** _____