



SOCCER

Conditioning Camp for High School & College Players



Date: August 8—12

Time: 4:00 - 7:00pm

Cost: \$75

Location:

Blue Valley Recreation Complex
9100 W. 137th Street, Overland Park

High School Soccer Coaches will instruct

Blue Valley Northwest	Shawnee Mission West
Blue Valley High School	Shawnee Mission East
Blue Valley North	Shawnee Mission Northwest
Blue Valley West	Shawnee Mission North
Blue Valley Southwest	Olathe South
Mill Valley	Lawrence Free State
Bishop Ward	St. Thomas Aquinas

Register by, August 5th. Register in person, by mail, fax, or online.

No phone-in registrations will be accepted.

REGISTRATION (Please Print)

Payee Last Name _____ First Name _____ Home Phone _____

Address _____ City _____ State _____ Zip _____
Blue Valley Resident: Yes No

Day Number _____ E-mail address _____

Payment Information: Check Cash Total Enclosed: \$ _____ *Make checks payable to Blue Valley Recreation*

MasterCard Visa Discover Card Holder _____ Signature _____

Card Number: _____ - _____ - _____ - _____ Expiration Date: _____ CVV Code _____

Code	Participant's Name	Birth Date	Activity Name	Start Date	Days	Time	Fee
163062-01			HS Soccer Camp	8/8	M,T,W,R,F	4-7 pm	\$75

CONFIRMATIONS ARE NOT SENT. PLEASE KEEP A RECORD OF YOUR ENROLLMENT.

The BVRC prohibits illegal discrimination and is committed to complying with the Americans with Disabilities Act. If you would like to request an accommodation or have any other inquiry regarding this policy, please contact the Administration Manager at (913) 685-6000 (voice) or Kansas Relay Service at (800) 766-3777, Blue Valley Recreation Commission, 6545 W. 151st Street, Overland Park, KS 66223. Please give at least two weeks advanced notice for any requested accommodation.

I understand that the program for which I or my child intends to participate may have some inherent risk of injury because of the activity. As a participant (or on behalf of my child), I agree that the BVRC, the BVSD and their employees and representatives shall not be held responsible for any illness or injury to person or damage to property resulting from my (or my child's) participating in a BVRC program. I further grant permission for the BVRC to use my (or my child's) photo or video for promotional purposes. This waiver and agreement shall be valid for 365 days from date of execution. Registration is not valid without signature. Parents must sign for children 18 and under entering a program. Please specifically list any allergies: _____

Parent/Participant/Guardian _____ Date _____ Use this form to fax or mail with payment to: Blue Valley Recreation Commission
9701 W. 137th St., Overland Park, Kansas 66221 Ph 913-685-6030, Fax 913-685-6031



Enriching lives, strengthening a spirit of community
Aquatics - Dance - Enrichment - Gymnastics - Special Populations - Sports
 For more information call 913.685.6030 Fax: 913.685.6031 www.bluevalleyrec.org
 Blue Valley Recreation Complex 9701 W. 137th Street, Overland Park, KS 66221