



2024 The Woodlands Area Soccer Camp

Come join the Lady Highlander Soccer coaches and players for a week of soccer skills and fun to kick off your summer!

Dates: May 28th - May 31st, 2024

Location: The Woodlands High School Practice Soccer Fields (behind the high school)

Future Highlanders	Little Highlanders
Who: Any Incoming 3rd-9th Grade Girls Time: 9:00am - 11:00am Fee: \$125 per child *Includes a T-Shirt	Who: Any Incoming Pre-K - 2nd Grade Girls or Boys Time: 9:00am - 10:30am Fee: \$90 per child *Includes a T-Shirt

Registration Form:
Camper's Name: _____
Grade Level in Fall of 2024: _____
Years of Playing Experience: _____
Current Level of Play: _____ _____
Parent's Name: _____
Parent's Email Address: _____ _____
Parent's Phone Number: _____
Camper's T-shirt Size: (Circle one) Youth: S M L Adult: S M L XL

Payments & Contact for Questions:
<u>Please Mail This Completed Form & Payment to:</u> Claire Eiteljorge 54 Hearthwick Pl Tomball, TX 77375
<u>Payment:</u> Cash, Check or Venmo are accepted.
<u>Checks:</u> Make checks payable to "Katherine Claire Eiteljorge".
<u>Venmo:</u> @claireEitel <i>*Please include your player's name in the subject line.</i>
<u>Questions:</u> Please send all questions and inquiries to Claire.eiteljorge@gmail.com or call 210-416-4664
<u>DEADLINE for Mail-In Registration is:</u> Monday, May 13, 2024 <i>*An additional \$10 will be added for late registrants due on the first day of camp</i>

Attire/Equipment: Please have your child wear a light-colored shirt, cleats, shin guards, an appropriately sized ball for their age group, and bring a water jug. Sometimes sunscreen and bug spray are needed as well.

** Extra balls and water refill station will be provided **

Required Information & Forms to Fill Out on Back!



CISD Camp Waiver:

Student's Name: _____

Activity: Soccer

In order for your child to be able to participate in the 2024 camp activities, it is necessary for you to sign this statement indicating your understanding that the district does not cover insurance covering injuries your child may sustain. By my signature, I am informing CISD that I understand that the district is not responsible for any accident or payments resulting from such an accident. In the event of injury to your child, we recognize that CISD, its board of trustees, its agents, and its employees are in no way liable for injuries, medical expense or damage and will have no insurance covering your child. We have made the choice on behalf of our child without any interference from anyone serving or employed by CISD. Dated this ____ day of _____, 2024.

Parent Signature: _____

Liability:

In the event of an emergency situation, I hereby authorize the Woodlands Area Soccer Camp staff to obtain medical attention for my child. I hereby waive and release both the WASC staff and CISD from any liability for the injury and/or illness that might occur while participating in this camp. I understand as an active participant in soccer that an accident or injury may occur.

Parent Signature: _____

Emergency Medical Contact: _____

Physicians Name and Number: _____

Please list any medical condition that we should be aware of: _____

** Please note that there is no trainer on site*

Photo Release:

Your signature below gives permission for your child's photo to be used for social media purposes such as Lady Highlander website, Instagram, and Twitter.

Parent Signature:

Date:

Camp Staff:

Katherine Claire Eiteljorge - Head Coach

Chelsea McCracken - Asst. Coach - TWHS Girls

Kelsa Dykehouse - Asst. Coach - TWHS Girls