



Warner Soccer

MEDICAL & HOLD HARMLESS AGREEMENT

A. Students Name _____ Parents Work Phone _____
Address _____ Home Phone _____
City _____ State _____ Zip _____

This agreement is made voluntarily on my part and is made with the understanding that I have read the Rules and Regulations of the School, and will not violate any of these Rules and Regulation during my residence at the School.

Date _____ Student signature _____

B. PERMISSION TO PARTICIPATE AND TRAVEL The undersigned as the parent or guardian gives consent for the participant identified herein to engage in the activities of the School and to accompany School staff.

Parent/Guardian Signature _____

C. INSURANCE As a parent or guardian of the student identified herein, I understand that the School is not liable for injuries to participants in School activities. I further understand that all participants shall be required to have proper **medical insurance before they will be permitted to participate in School activities.** Date _____ Parent/Guardian Signature _____

Insurance Company _____ Phone Number _____

Policy Number _____ Expiration Date _____

D. MEDICAL RELEASE FORM The undersigned as the parent or guardian of the participant identified herein does hereby consent to any and all medical and surgical treatments, including anesthesia and operations which may be deemed advisable by any qualified physician selected by agents of the School. The intention hereof is to grant authority to administer and to perform all and singularly any examination, treatments, anesthetics, operations and diagnostic procedures which may, during the course of the School session, be deemed advisable or necessary by any qualified physician. No action shall be taken until an attempt is made to contact me at the phones listed above. List any special health problems, abnormalities or allergies to medicine, foods, insects, etc.

E. COPY OF MEDICAL CARD Please make a copy, front and back of the insurance card to be able to present to the hospital.

IN WITNESS of my consent and agreement to the matters stated above, I have subscribed my signature: Parent/Guardian Signature _____

STATE OF _____ COUNTY OF _____ Subscribed and sworn to before me this
_____ day of _____, 20_____
My commission Expires: _____ Notary Public _____

OR

As parent or guardian of the participant identified herein, I do not desire to sign the Medical Release form above. Date: _____
Parent/Guardian Signature _____

WARNER SOCCER RESIDENTIAL RULES AND REGULATIONS

We are looking forward to your attendance at the Warner Soccer College Preparatory Camp sponsored by Warner Sports, Inc. We know that you are coming to learn more about soccer and improve your individual skills. It hardly seems necessary to list rules and regulations; however, so there will be no misunderstanding, **violations of the following rules will result in immediate dismissal from the Center.**

1. You are expected to remain at the School at all times; permission to leave must be obtained from the Director and check out procedures must be followed as given by Director.
2. You are required to attend all meals, training sessions, games and lectures unless permission to be excused is given by Director.
3. Once you are assigned to a room, you are not to change it without formal permission from the Director. After the "Lights Out" time each night, you are not allowed to be out of your room to sleep in another room.
4. It is expected that students will live together with mutual respect for one another and their property. It is forbidden to enter another student's room during his/her absence. It is also expected that you respect all students from other camps and the administration at South Gate.
5. Flammables, explosives, & firearms are not permitted in the School. Tampering with electrical wiring, lighting, fire equipment or alarms is forbidden.
6. Possession or the use of tobacco, alcoholic beverages or drugs is illegal and against the rules.

Player Signature _____

Parent Signature _____

TRAVEL INFORMATION

Player's Name _____ Attending Date _____

Will arrive by Car Bus Airplane

Planned arrival and departure information (include dates & days, times and any special considerations.) _____

We will provide transportation to and from the Tallahassee airport and bus stations upon request.

WARNER SOCCER RESIDENTIAL CHECK IN AT SOUTH GATE

CHECK-IN TIME WILL BE JULY 17 BOYS AND JULY 22 FOR GIRLS & ACADEMY FROM 11:30-12:30PM AT SOUTHGATE (follow the signs from the parking area). PLEASE LEAVE YOUR LUGGAGE AND EQUIPMENT IN YOUR CAR UNTIL YOU HAVE CHECKED IN AND RECEIVED YOUR ROOM NUMBER AND KEY. Please eat lunch before checking in, the first meal at camp will be Dinner.

PARENTS WELCOME TO ATTEND ORIENTATION IN CAFETERIA AFTER CHECK IN.

CHECK-OUT TIME IS JULY 20 AND JULY 25 FROM 4:00-5:00PM AT SOUTHGATE.

ANY SPECIAL REQUESTS FOR DIFFERENT CHECK-IN OR CHECK-OUT TIMES NEEDS TO BE SENT TO US IN WRITING I.E. GOING HOME WITH OTHER THEN THE PARENTS.

MEDICATIONS & PRESCRIPTION MEDICINES: Please advise our staff of ANY medicines brought to camp in writing (either sent with the camper or at check-in). Special arrangements can be made for monitoring or dispensing any medications at the parent's request.

Directions: Address of Southgate- 675 W. Jefferson Street, 32304

Coming from I-10, exit 199 (Monroe Street). Go South until Jefferson Street (turns into Pensacola Street), turn right.

The dorm will be on the right hand side of the road however, the main parking garage is on your LEFT across from South Gate. Go to the 3rd floor of the parking garage to access the walkover which leads to check-in. Caution: the height of the garage is 14 feet.

Check out Procedures

After the afternoon games on Thursday, the campers will depart the Meadows and go back to Southgate. The campers will pack, check out and depart for home. Dinner is NOT provided.

Students do room-check for:

1. all trash in containers
2. no personal items left in closets or under bed
3. general appearance of room to be left in condition upon arrival

ALL roommates are responsible for the condition of the room before anyone turns in their key.

After room is cleaned and checked by students they must go to check-out table and locate a staff person for room check. The staff person will sign a clearance ticket that is turned in along with room key at table.

LOST KEYS COST: If you lose your key the fee must be paid to SOUTH GATE front desk prior to checking out (\$20). Have a safe trip home and implement what you learned at camp!!

IMPORTANT!!!

Please review the following list of items you will need to bring. If you feel is necessary to bring more items, feel free to do so as there is plenty of room for your personal things.

_____ 6 socks- soccer	_____ soccer shoes
_____ 6 shorts	_____ shin guards (mandatory)
_____ 6 t-shirts-training	_____ soccer ball
_____ toiletry items	_____ sports tape
_____ 2 towels	_____ band aids
_____ underwear	_____ 1 light blanket
_____ notebook/pencils	_____ sun screen lotion
_____ pillow & twin bed sheets	_____ alarm clock
_____ detergent	_____ cash for concessions
_____ desk lamp	_____ pre-wrap and tape*

***You must provide your own pre-wrap and tape to be wrapped.
Lost keys cost- \$20 to be paid at check out.**

Concessions at the soccer field will be open during the day and early evenings for drinks and snacks. The campers may also bring money for pizzas which are usually ordered in the evenings and delivered to the dorms if they want.

We are fortunate that we are housed in the dorms of Southgate on Florida State University's campus. The rooms accommodate four campers per room with its own bathroom & shower. Every effort will be made to accommodate your roommate requests but we cannot guarantee requests. The rooms at Southgate are NOT equipped with refrigerators or microwave ovens but you may bring a cooler to keep drinks and snacks in your room (ice will be available). Each room is air-conditioned and comfortable. There is a big screen T.V. in the ballroom and laundry and vending facilities on each floor. Southgate's meals are excellent and feature cafeteria-style food.

IMPORTANT CONTACT INFO

Southgate Front Desk:	850-425-4200
Warner Soccer (at the fields):	850-893-8989
Warner Soccer office:	850-386-3866
Warner Soccer email:	warnersoccer@warnersoccer.com
Andy Warner Cell:	850-528-7578
Lisa's Cell:	850-510-0196