

Bloomsburg University

HUSKIES SOCCER

Spring Developmental Camps



Sports Stadium (Upper Campus)

March 9 th	9 - 11:45 a.m. / 12:15 - 3 p.m.	March 30 th	9 - 11:45 a.m.
March 16 th *	9 - 11:45 a.m. / 12:15 - 3 p.m.	April 20 th *	9 - 11:45 a.m. / 12:15 - 3 p.m.
March 23 rd	9 - 11:45 a.m. / 12:15 - 3 p.m.	April 27 th	9 - 11:45 a.m. / 12:15 - 3 p.m.

Boys and Girls (7-12 years) 9 - 11:45 a.m. / Girls (12-18 years) 12:15 - 3 p.m.

*Boys only the afternoon's of March 16 and April 20th.

About the Camps

The clinics are designed for young soccer players (7-12 & 12-18 year old) and teams who wish to continue to develop their skills and soccer knowledge. The main purpose of the program is skill development, however every aspect of soccer will be covered by the Bloomsburg Coaching staff. The camp will feature small group instruction, small-sided games and how to become 'soccer fit'.

Staff/Administration

David Shemilt – Camp Director, assistant coach at Bloomsburg University. A native of Stoke-on-Trent, England, UK, Coach Shemilt has recently rejoined the Bloomsburg University Athletic staff as Assistant Women's Soccer Coach after serving one year as Assistant Men's Coach at King's College, Wilkes-Barre, PA, as well Assistant Men's Coach at Bloomsburg prior to that. Coach Shemilt has worked a number of MLS camps as a player development officer/coach within a number of different soccer clubs, coaching recreational, travel, and elite teams while also coaching coaches. Coach Shemilt earned a Bachelor of Science (Hons) degree in Sports Science from the University of Worcester, England, in 2004 before completing his Master of Science degree in Sport Science from Indiana University of Pennsylvania in December, 2006.

Fees

\$45.00 – per player/per session. If signing up for three or more sessions, get 15 dollars off the 3rd.

Make Checks payable to Bloomsburg University. Lunch is not included.

*All players should bring a soccer ball, shin guards and a water bottle. Teams are welcome to sign-up. Call 570-951-9008 to ask about team training, registration, and cost. Huskies players will also staff clinics.

Tentative Schedule:

8:30 a.m. - 9 a.m.	Registration / group division.
9 a.m. - 9:30 a.m.	Soccer-specific warm-up
9:30 a.m. - 11:45a.m.	Instruction (including skill development, soccer fitness and small sided games).
11:45 a.m. - 12:15 p.m.	Cool down and second session registration.
12:15 p.m. - 12:45 p.m.	Soccer-specific warm-up
12:45 p.m. - 2:45 p.m.	Instruction (including skill development, soccer fitness and small sided games).
2:45 p.m. - 3 p.m.	Cool down and departure.

Camp Application

Full payment should be mailed to: Women's Soccer, Nelson Field House, Bloomsburg University, Bloomsburg, PA 17815

Camp: Mar. 9 | Mar. 16 | Mar. 23 | Mar. 30 | Apr. 20 | Apr. 27 (circle) Session: AM | PM | Both (circle)

Name _____

Street Address _____ City/State/Zip _____

Home Phone _____ Email _____ Grade ____ Pos. _____

Medical Insurance Information

Company Name _____ Policy No. _____

I approve my child's attendance at Huskies Soccer Spring Developmental Camp and certify that he/she is in good health. If medical attention is required for injury or illness during the camp, I grant my permission for such care to be rendered. I hereby recognize and understand that the University, the camp director and/or the coaching staff are not responsible for any injury of any kind that may occur on the way to, during or on the way home from any camp session sponsored by the Bloomsburg University of Pennsylvania.

AUTHORIZATION FOR EMERGENCY SERVICE

A) I do hereby voluntarily consent to examination and emergency service treatment including the administration of such drugs. Infusion and transfusion of blood or blood components deemed necessary in the judgement of physician(s) (and whomever my be delegated as assistants) of the medical staff of the Bloomsburg Hospital. B) I certify that I have read and fully understand the consent given herein. I also certify that no guarantee or assurance has been made as to the results that may be obtained. The undersigned intends to be legally bound hereby.

Note any limitation on the foregoing _____ or if none so indicate _____

Date _____ Authorized Signature _____ Relationship _____