



# Santa Margarita Soccer Camps

All camps are directed by Girls Head Coach Chuck Morales and Boys Head Coach Wade Fraser

**PASSING ~ COLLECTING ~ DRIBBLING ~ ATTACKING ~ FAST FOOTWORK ~ DEFENDING ~ SHOOTING**



### GIRLS HIGH SCHOOL CAMP

June 14 - 17, 4:00 to 7:00pm, \$150  
(Code GHS) Camp open to 7th graders and above

### BOYS HIGH SCHOOL CAMP

June 21 - 23, 8:00-11:00 AM, \$150  
(Code BHS) Camp open to 7th graders and above

### GIRLS COLLEGE CLINIC

June 26 - 27, 9:00 to 5:00pm, \$265  
(Code CC) Camp open to high school players



<p><b>Boys &amp; Girls</b> <b>Winter Break Camp</b> Dec 21 - 23, 2009 4:00-7:00 PM Grades 1 thru 8 \$125 (Code W), SMCHS</p> <p><b>Boys &amp; Girls</b> <b>Spring Break Camp</b> Apr 5 - 7, 2010 8:00-11:00 AM Grades 1 thru 8 \$125 (Code S), SMCHS</p>	<p><b>Jun 28 - Jul 1</b> <b>FAST ATTACK</b> Grades 1 thru 8 Camp are instructed in all fast attacking options utilizing faking moves</p> <p><b>BOYS &amp; GIRLS</b> 8:00-11:00 AM Incl Futsal ball &amp; shirt \$150 (Code J28)</p> <p>Head Girls Coach Chuck Morales Head Boys Coach Wade Fraser</p>	<p><b>July 12 - 15</b> <b>FAST FUTSAL</b> Grades 1 thru 8 Futsal is played on flat hard surface with much emphasis on quick ball control</p> <p><b>BOYS &amp; GIRLS</b> 8:00-11:00 AM Incl Futsal ball &amp; shirt \$150 (Code J12)</p> <p>Girls Head Coach Chuck Morales Boys Head Coach Wade Fraser</p>	<p><b>July 26 - 29</b> <b>FAST FOOTWORK</b> Grades 1 thru 8 Camp emphasizes agility and quickness of footwork with and without soccer ball</p> <p><b>BOYS &amp; GIRLS</b> 4:00-7:00 PM Includes ball &amp; shirt \$150 (Code J26)</p> <p>Girls Head Coach Chuck Morales Boys Head Coach Wade Fraser</p>	<p><b>Aug 9 - 12</b> <b>KICKOFF CAMP</b> Grades 1 thru 8 Camp prepares players for fast paced entry into upcoming soccer season</p> <p><b>BOYS &amp; GIRLS</b> 8:00-11:00 AM Includes ball &amp; shirt \$150 (Code KD)</p> <p>Girls Coach Chuck Morales Boys Head Coach Wade Fraser</p>
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### CAMP APPLICATION

1st Player Name \_\_\_\_\_ Birthdate \_\_\_\_\_ Camp C code \_\_\_\_\_

2nd Player Name \_\_\_\_\_ Birthdate \_\_\_\_\_ Camp Co de \_\_\_\_\_

Parent Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

T-Shirt AXL AL AM AS YL YM YS Email \_\_\_\_\_

I hereby permit the above named to participate in the above named camp. Should it be necessary for my child to receive medical treatment while participating in this activity, I hereby grant school personnel permission to use their judgment in obtaining medical treatment for my child. I give permission to the physician selected by school personnel to render medical treatment as deemed necessary by the physician. I understand that any insurance benefits in effect have limited application. We also allow pictures of camp participants to be used for future SMCHS Soccer camp publicity.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Checks payable to: SMCHS SOCCER, 22062 Antonio Parkway, Rancho Santa Margarita, CA 92688  
attn Coach Chuck Morales      CAMP INFORMATION LINE (949) 933-6156      www.santamargaritasoccer.org