

I hereby give permission for the below named Camper/Athlete to be examined by a trainer or licensed physician for treatment for any injury/illness and to release the below insurance information

Camper's Name _____

Parent/Guardian Name _____

Street Address _____

City/State/Zip _____

Home Phone _____

Parent's Work Phone _____

List any physical condition that the camp staff should be aware of. (ie.allergies, illnesses, disabilities, etc.)

>>>In case of injury, I understand that I will be contacted during the child's examination. If I am not available, please contact:

Name _____

Phone _____

Family Physician _____

Phone: _____

The undersigned assumes full responsibility for any injuries, damages or loss which may occur to Camper/Athlete in, on, or about the premises of By the Bay soccer camp/Thousand Islands Central School and fully and forever releases and discharges and agrees to hold harmless By the Bay Camp/Thousand Islands Central School, its officers, employees, and agents from any and all claims, demands, damages, rights of action, or causes of action present or future, whether the same be known, anticipated or unanticipated, resulting from or arising out of participation in the By the Bay Camp.

Parent or Guardian Signature _____ Date _____

Please return to:

Shannon Amo or Jill Amo
Ph. 315-686-5594 ext.5640
315-408-8776 cell

Form can be mailed to:
By the Bay Soccer Camp
PO Box 100
Clayton, NY 13624



- **Things you will need**
- **Cleats**
- **Shin guards**
- **Water Bottle**
- **Snack**

2024 By The Bay 21st Annual



Soccer Camp

BOYS AND GIRLS

August 12-15

Grades PK-6

By The Bay Soccer Camp

TI Athletic Fields August 12-16 Boys & Girls Grades PK-6

Camp Directors: Shannon Amo/Jill Amo
Camp Location: TI Turf and Practice soccer fields

Grades PK-3: \$60.00 8:30-10:00
Grades 4-6: \$65.00 8:30-10:30

Cost if your child attended kickoff camp

PK-3- \$50
4-6 \$55

Outstanding Camp Features

- *Free Camp T-shirt (only Pre Registered campers receive T-shirt) July 23rd*
- *Skill Development*
- *Games and Drills*
- *It's Fun*

Soccer Camp Application

Name: _____

Age: _____

Sex: F /M

Address: _____

City: _____ State _____

Zip _____

Phone Number _____

School: _____

Grade (Fall 2024) _____

T-Shirt Size: S ___ M ___ L ___ XL ___

Youth S ___ M ___ L ___

Make Checks payable to:
By the Bay Camps

Payment Must Accompany this Application by July 1st 2024 to receive a t-shirt

Online Registration on Facebook under Shannon Amo- Venmo payment option

(Applications will be accepted the first day of camp)

If you have any questions, please call Shannon Amo @ 315-408-8776

