



SONESOCCKER

Team Pre-Season Camps

Get the **EDGE** on your competition and prepare for fall season with a
PRE-SEASON TEAM CAMP
 provided by SONESOCCKER's professional training staff at your location.

Options are available for full-week camps or weekend mini-camps, and are appropriate for teams at all ages and levels from pre-school Recreation through Travel through Club and Academy, as well as for High School teams. Pre-Season camps develop the technical and tactical focus required for the coming season, and focus on the physical requirements of competitive game-play. Team-building exercises and an element of fun serve to build team morale for the game-day challenges that lie ahead. Our staff works with the team coach or manager prior to the camp to ensure objectives are met. For more information or to book your pre-season team camp now, contact Steve Mahaney at steve@sonesoccer.com or 908-500-9696.

MID-SUMMER FULL WEEK – *Your greatest value!*

Weeks (Mon-Fri) of July 5, 12, 19 26, August 2, 9, 16
 Three time slots: 9am-12pm; 1pm-4pm; 5pm to 8pm (can be a later start)
 \$90 per player (minimum 12 players); \$100 for evening time slot

MID-SUMMER WEEKEND – *Mini-Camp*

Weekends (Sat/Sun) of July 10, 17 24, 31, August 7, 14
 Three time slots: 9am-12pm; 1pm-4pm; 5pm to 8pm (can be a later start)
 \$45 per player (minimum 12 players)

LATE-SUMMER FULL WEEK

Weeks (Mon-Fri) of August 23, 30, September 6, 13
 Three time slots: 9am-12pm; 1pm-4pm; 5pm to 8pm (can be a later start)
 \$125 per player (minimum 12 players); \$140 for evening time slot

LATE-SUMMER WEEKEND – *Mini-Camp*

Weekends (Sat/Sun) of August 21, 28, September 11
 Three time slots: 9am-12pm; 1pm-4pm; 5pm to 8pm (can be a later start)
 \$75 per player (minimum 12 players)

Full Payment is due a minimum of 1 week prior to your scheduled Camp start date.
 10% Discount for 2nd and subsequent teams booking the same dates and location (can be different times)

TEAM PRE-SEASON CAMP

Team Name _____
 Contact Name _____
 Contact Position w/ Team _____
 Address _____
 City _____ State ____ Zip _____
 Tel – Eve _____ Day _____
 Email _____

Enter your date selection:

Mid-Summer Full Week _____ Weekend _____
 Late-Summer Full Week _____ Weekend _____
 Time slot preferred: 9-12 _____ 1-4 _____ 5-8 _____
 Location: _____

METHOD OF PAYMENT

MasterCard Card# _____
 Visa Exp. Date _____ / _____
 Check Checks payable to **SoneSoccer**
 Mail to: PO Box 3, Long Valley, NJ 07853

Total Fees \$ _____

WAIVER: As the official representative of the team named above, I understand that there are certain risks of injury inherent in the practice and play of this sport, as well as in traveling and other activities incidental to our players' participation, and we are willing to assume these risks on behalf of our players. I do hereby waive, release and hold harmless Sonesoccer, their officers, coaches, sponsors, supervisors and representatives for any injury that may be suffered by any player on our team in the normal course of participation in soccer and the activities incidental thereto, whether the result of negligence or any other cause. I grant Sonesoccer the authority to use pictures of our team and players in future promotions. Also, I agree be bound by the terms of the Sonesoccer refund policy, which can be found at www.njsoccergroup.com/refunds.

Signed _____
 Date _____ / _____ /2010