

# 2021 CENTRAL ILLINOIS SOCCER ACADEMY SUMMER CAMP REGISTRATION

NAME: \_\_\_\_\_  
LAST FIRST MIDDLE

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

EMAIL: \_\_\_\_\_ PHONE: ( \_\_\_\_\_ ) \_\_\_\_\_

DOB: \_\_\_\_\_ AGE: \_\_\_\_\_ GRADE (2019-20): \_\_\_\_\_

POSITION: \_\_\_\_\_ TEAM (School / Club): \_\_\_\_\_

EMERGENCY PHONE: ( \_\_\_\_\_ ) CONTACT: \_\_\_\_\_

SHIRT SIZE (CIRCLE ONE) **ADULT:** S M L XL **YOUTH:** Medium (8-10) Large (10-12)

## CAMP SELECTION

- BOYS & GIRLS KICKING KIDS CAMP (AGE 5 - 7) -- JULY 12<sup>TH</sup> to 15<sup>TH</sup> (Mon - Thurs) 9:00 AM - 11:00 AM \$85
- BOYS & GIRLS JUNIOR DAY CAMP (AGE 8 - 14) -- JULY 12<sup>TH</sup> to 15<sup>TH</sup> (Mon - Thurs) 9:00 AM - 12:30 PM \$150

Camps will take place at the Louisville Slugger Sports Complex (outside turf fields), 8400 Orange Prairie Road, Peoria, IL 61615

Contact Tim at [tregan@fsmail.bradley.edu](mailto:tregan@fsmail.bradley.edu) with any age group questions/concerns

## \*\* DISCOUNTS \*\*

- Group / Team of 10 or more with check payment enclosed in same envelope gets \$10 off per camper
- 3 or more children in one family with check payment enclosed in same envelope gets \$10 off per camper

## PAYMENT OPTIONS

Total Amount Enclosed: \$ \_\_\_\_\_ Make Checks payable to: Central Illinois Soccer Academy/CISA

Mail Payment/Registration to: Central Illinois Soccer Academy, 1501 W. Bradley Ave., Peoria, IL 61625

Credit card payments online at:

<https://centralillinoisocceracademy.com/registration/>

## MEDICAL RELEASE WAIVER (PLEASE FILL OUT COMPLETELY):

It is the responsibility of the camper's parents or legal guardians to ensure that the camper is healthy and has no physical problems, which would prevent the camper's participation in camp activities. Responsibility for primary medical insurance coverage rests with the camper.

POLICY HOLDER'S NAME: \_\_\_\_\_

MEDICAL INSURANCE COMPANY: \_\_\_\_\_

POLICY NUMBER: \_\_\_\_\_

SPECIAL MEDICAL NEEDS (Bradley University cafeterias are nut free): \_\_\_\_\_

\*\*Central Illinois Soccer Academy (CISA) camps are open to any and all entrants, in accordance with NCAA camp and clinic legislation (limited only by number, age, grade level and/or gender)." (NCAA Bylaw 13.4.3.2) The CISA is independently owned and operated and is in no way administered or associated with Bradley University.

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## Medical Liability Waiver

This certifies that \_\_\_\_\_ has had a physical examination by a licensed physician in the past year and is free from any illness or injuries that would prevent him/her from participating in any activities at the Central Illinois Soccer Academy while my son/daughter/ward is present at camp.

## COVID Medical Liability Waiver

In participating in CISA Summer Camps, the undersigned acknowledges, appreciates, and agrees that:

1. The risk of injury and/or illness from the activities involved in the program is unlikely but possible, and while particular practices, rules, equipment, and personal discipline may reduce the risk, the risk of injury or illness does exist;
2. The risk to have contact with individuals, who have been exposed to and/or have been diagnosed with one or more communicable diseases, including but not limited to COVID-19 or other medical conditions, diseases, or maladies does exist, and it is impossible to eliminate the risk that I could be exposed to and/or become infected through contact with or close proximity with an individual with a communicable disease;
3. I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of staff associated with CISA, and assume all full responsibility for my child's participation;
4. On behalf of my child participating in the Summer Camp, I hereby release and hold harmless CISA and their employees, other participants, and if applicable, owners and lessors of the premises used to conduct the Summer Camps, WITH RESPECT TO ANY AND ALL INJURY, ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.
5. I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY AGREEING TO IT ON MY OWN BEHALF OR ON BEHALF OF THE YOUTH PARTICIPANT ASSOCIATED WITH THIS GUARDIAN ACCOUNT, AND I SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Acknowledgement by Parents and or Legal Guardian of youth participant:

By acknowledging and agreeing, I agree to and verify the following:

- 1) I consent and agree to assume the risks of participation in the Summer Camps programming; and
- 2) that I specifically agree to the release as provided herein of CISA and Staff, and, for my child, I release and agree to indemnify CISA and Staff from any and all liabilities incident to my child's involvement or participation in the Summer Camps even if arising from the negligence of the CISA and Staff.

## Refund Policy

Refunds will be given when we receive written notice from a physician stating that the athlete is physically unable to participate in the camp.

Refund requests will be reviewed by the staff for validity; all approved refunds will incur an administration fee, which will be deducted from your refund amount.

Junior Day camp = 7%

Kicking Kids = 9%

PARENT / GUARDIAN SIGNATURE:

SIGNED: \_\_\_\_\_

DATE: \_\_\_\_\_

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