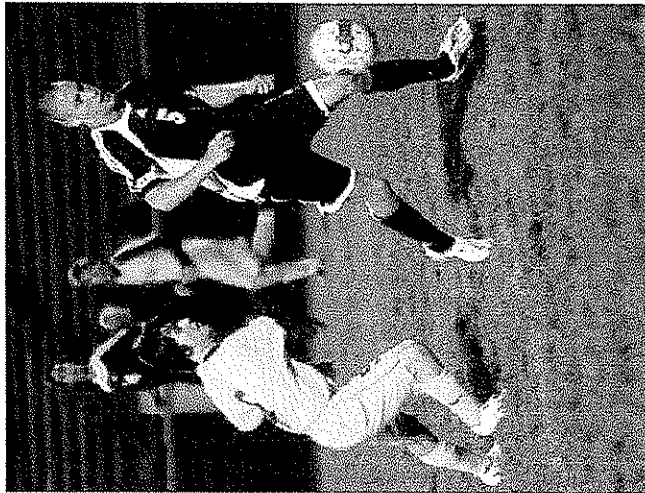


Bloom-Carroll Dawg Days of Summer Soccer Camp



**July 7th - 10th
6:00PM-8:00PM**

This will be the 9th year of the **Dawg Days of Summer Soccer Camp**. Each year the number of participants has grown, and each year the players have enjoyed the "fun" demeritals of soccer.

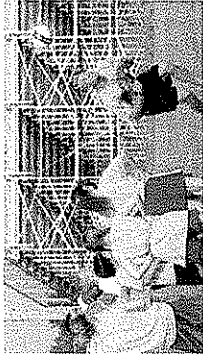
Each Camper will receive a camp t-shirt and soccer ball (age appropriate) during the camp along with training in the basic fundamental (at the younger ages) and advanced training (for the older ages).

If you have any questions feel free to contact Camp Director Robb Ingram 740-756-4058(home) or by email kebi22@sbcglobal.net



Camp Director Robb Ingram enters his 9th year as Coach of the Bloom-Carroll boys soccer team. Under the programs coaches and his leadership along with the hard work of his players there has been a successful tradition here at Bloom-Carroll.

All profits go to support the soccer programs here at Bloom-Carroll.



Mark Casperson (above), Field Training upper ages

Coaching qualifications:

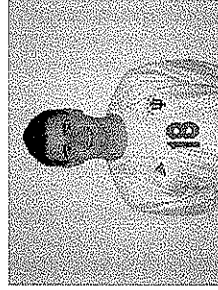
- *USSF F and E Licenses
- *NSCAA Regional Diploma
- *Current assistant coach at Ohio Christian University
- *2006 and 2007 City League Coach of the Year
- *B.A. in Physical Education from The Ohio State



Dirk Ingram (above) Goal Keeper Training

Coaching qualifications:

- 4 year Goal Keeping coach and strengthening coach at Bloom-Carroll High School



Nick Blevins (above)

Former BCHS Player School record holder for goals, assists and points.
National Academic Player of the year 2007
Currently plays at Indiana University

Dog Days of Summer Soccer Camp

July 7th -10th 2009 6:00PM-8:00PM

Location: Bloom-Carroll High School Soccer Field

Cost \$55.00 per camper (if postmarked by due date 6/05/09)

\$65.00 per camper (if postmarked and received after 6/05/09)

\$75.00 per camper (if registering the day of camp)

Student's Name _____

Parent's Name _____

Street Address _____

City _____ State _____ Zip _____

E-mail Address _____

(Please enclose your email address if you want to be reminded about the start of camp and any other camp related information. Please detach and retain upper portion for your records.)

Gender (Circle one): Male/Female

T-Shirt Size (Circle one): YS--YM--YL--AS--AM--AL

Number of seasons played: _____

Position played (List the most important): _____

Date of Birth : _____ (MM/DD/YYYY)

Age as of the first day of camp _____

Phone (Home) _____ Phone (Cell) _____

Send Payment to: Dog Days of Summer Soccer Camp

P.O. Box 116

Carroll, OH 43112

(Make check payable to "BCAB". Payment and registration must be returned by June 12th to guarantee camper receives a ball and t-shirt.)

My child is in good health and has my permission to participate in the **Dog Days of Summer Soccer Camp** activities. In the event of an emergency, I hereby give permission to the Director to secure proper treatment for my child. I also realize that soccer is a collision sport and injuries do happen. I will not hold any Bloom Carroll personnel or camp authorities responsible in case of accident or illness. In Case of Emergency, Director will refer my child to area hospitals.

All pictures or videos taken during the week may be used at the discretion of **Bloom Carroll High School Soccer**.

Camp will be held rain or shine. In case of inclement weather and for the safety of your child, camp may be dismissed early and/or cancelled with no make-up time rescheduled.

Parent Signature _____ Date _____