



2011 MARDI GRAS SOCCER CAMP

CAMP GOALS

- To improve each players knowledge, technical & tactical skills while enjoying the game
- To enhance each players understanding of the game
- To emphasize individual and team play and good sportsmanship

CAMP DATES

- March 7, 9, 10, 11 (Monday, Wednesday, Thursday and Friday)

COST

- Full day 9am-4pm \$135
- Half Day 9am-12pm \$85

LOCATION

- Jefferson Indoor Soccer Facility (6124 Jefferson Hwy)

CAMP DETAILS

- Campers will be divided by age and ability.
- Camp is open to Girls and Boys ages 5 to 17.
- Team discounts are available (8 player min) of \$10 per player.
- Each player will receive a FREE camp T-shirt.
- Each camper should bring soccer shoes, shin-guards, and soccer ball.
- Enrollment is limited. Checks should be made payable and mailed to:
CFJ-LA Soccer Camps, Att: Mardi Gras Soccer Camps, 1918 18th Street, Kenner, LA 70062

For more information go to WWW.CHICAGOFIREJUNIORSLOUISIANA.COM or contact
Club DOC, Julio Paiz, 465-8224 office, jpaiz@chicagofirejuniorslouisiana.com
Club DOC, Hubie Collins, 504-465-8224, hcollins@chicagofirejuniorslouisiana.com
Club DOC, Louie Smothermon, 504- 465-8224 office, lsmothermon@chicagofirejuniorslouisiana.com

CFJ-LA CAMP STAFF

- **Hubie Collins** – USSF “A” License, USSF “Y” License, CFJ-LA Director of Coaching, ODP Louisiana State Staff Coach, Jesuit High School Head Coach
- **Julio Paiz** – USSF “A” License, NSCAA National Advance Diploma, USSF “Y” License, CFJ-LA Director of Coaching, ODP Louisiana State Staff Coach and Instructor, Archbishop Rummel High School Head Coach
- **Louie Smothermon** - USSF “A” License, NSCAA Premier Diploma, USSF “Y” License, CFJ-LA Director of Coaching, ODP Louisiana State Staff Coach, former New Orleans Storm Assistant Coach/Player, Brother Martin High School Head Coach
- **CFJ-LA Coaching Staff**

2011 CFJ-LA WINTER CAMP APPLICATION

Week I – March 7, 9, 10, 11

Please circle half or full day and include your payment with the application:

Full Day \$135

Half Day \$85

Name _____

Male _____ Female _____ Age _____ Birthdate _____

Street _____

City _____ State _____ Zip _____

Parent's Name _____

Parents Phone: Home# _____ Work# _____

E-mail _____ Cell # _____

Emergency Contact# _____ Phone# _____

The camp fee should be paid in full and accompany this application. Restrictions apply on the refund of camp fees. Checks should be made payable to CFJ-LA and sent along with this application to:

CFJ-LA Soccer Camps
ATT: Mardi Gras Soccer Camp
1918 18th Street
Kenner, LA 70062

Permission to participate, Release of Liability, and Authorization for Medical Treatment. The named participant is in good health and has my permission to participate at the CFJ-LA Soccer Soccer Camp. I hereby release Louie Smothermon, Julio Paiz, Hubie Collins, CFJ-LA Soccer Club and all of their respective employees, officers, directors, agents, officials, and volunteers from and against any liability claims and demands for any injury or illness incurred at the CFJ-LA Soccer Camps. I hereby assume complete financial responsibility for any personal injury or property damage created as a result of an intentional or negligent act of my child or ward while he or she is attending CFJ-LA Soccer Camps. If my child needs medical treatment and my consent cannot be obtained, I hereby agree that Louie Smothermon, Julio Paiz, Hubie Collins or other CFJ-LA Soccer Camp personnel may consent to appropriate medical treatment for my child. This release will be in effect during the camp dates shown above. I will be responsible for any costs of medical treatment incurred during this period of time.

Signed _____ **Date** _____