

QUEST SOCCER YOUTH CAMPS

COMMITMENT TO EXCELLENCE

GOLDEN GOAL CAMP

WHO: Boys and Girls
Ages: 6 - 13
WHERE: Kirk Schuring Park
WHEN: Mon Jul 6th – Thurs Jul 9th
TIME: 9:30 - Noon
COST: \$90.00

CAMP DIRECTOR

Frank Gagliardi
30 yrs. of youth coaching &
camp directing
former Canton Invader of NPSL
Jackson HS Girls Coach 29 yrs.
captain, MVP & All-conference
player for Ohio Northern University

CAMP STAFF

**Members of the Jackson Girls Soccer Team
Current and former College Players**

DRILLS AND TOPICS COVERED

Speed and Agility Training
Dribbling & Footskills
Passing & 1ST Touch
Shooting
Heading
Small Group Tactics

*We guarantee you that the staff at the Quest
Soccer Camp will do everything it can to
ensure you an environment conducive to
learning soccer and having a great time!*

****Second Family member \$10 off at same camp****
Camp flyers were paid for by Quest – Staff is FBI background checked

**Please complete & return your camp
registration & payment to:**

Frank Gagliardi
6585 Hythe Street NW
Canton, OH 44708

Camp Name: _____

Location: _____

Name of Camper : _____

AGE _____ **DOB** _____ **Grade** _____

Address: _____

School: _____

Emergency Phone _____

MEDICAL RELEASE FORM

I certify that my child enrolled above is in excellent health and may participate in strenuous physical activities including soccer. I agree to defend and hold the coaches of the Quest Soccer Camp, U.S. Club Soccer, Jackson Fury soccer club, and all their servants, agents, and/or employees and contractors harmless from any and all claims for injuries sustained by my child during his/her participation in the camp. Permission is granted for my child to receive emergency medical treatment, if needed. I certify that there are no limits to my child's participation except as stated in writing and included with this application.

Consenting Parent's/Guardian's Signature:

Address: _____

Physician's name: _____

Hospital: _____

Medical History: _____