

HOCKINSON COMMUNITY EDUCATION PROGRAM



Boys & Girls Soccer Camps

Grades K - 5 (school yr. 2020-2021)

In this class students will learn to develop their soccer skills in a team atmosphere. QuickStart Sports will conduct drills and games that are fun and will teach every player the necessary skills and fundamentals involved in the game. Focus on dribbling, ball control, passing, defending and of course scoring! Additionally, students will work on various agility exercises aimed to improve quickness, mobility and provide that extra edge! Please have your child bring a snack and a water bottle each day; and wear clothes your student can easily move in, and good sturdy shoes.

You may signup for this camp online at <https://wa-hockinson.intouchrecepting.com>

Dates: Monday - Thursday, Aug. 3 - 6
Cost: \$99
 Boys & Girls, grades K-2 9 am -12 noon Class #4012-20
 Boys & Girls, grades 3-5 1 - 4 pm Class #4013-20
Where: Hockinson Middle School

Questions: Call Hockinson Community Education, (360) 448-6480

Registration

To register, simply fill out the registration form on this page and mail with payment to the address listed on the form. Register early! You may confirm your registration by calling 448-6480. You will be notified only if your registration cannot be processed.

Refunds

To receive a refund the Hockinson Community Education office must be notified of your intent to withdraw from a class at least 3 business days prior to the first class meeting. A \$10.00 processing fee will be charged for all refunds. If a class is canceled by Hockinson Community Education you will be notified and all fees will be refunded in full.

Youth Classes

Parents/Guardians are responsible for picking up children *in the classroom* no later than closing time of class.

If late picking up your child you will be charged \$1.00 per minute you are late.

HOCKINSON Community Education		Mail this registration form and check to: 17912 NE 159th St., Brush Prairie, WA 98606			
NAME: Last _____ First _____		Grade _____			
Address _____		City _____		Zip _____	
Home Phone _____		Cell Phone _____		Emergency Contact _____	
E-Mail Address (please print) _____					
Parent/Guardian's Name _____					
Does your child have any medical conditions or allergies of which staff should be aware? Yes <input type="checkbox"/> No <input type="checkbox"/>					
If yes, please explain: _____					
Donation: Yes, I would like to make a tax-deductible contribution of \$_____ to the registration assistance fund. Monies contributed to this fund are applied toward the registration fee for those who otherwise would be unable to participate in Community Education sponsored programs.					
<small>Hold Harmless Agreement and/or Parent/Guardian permission for youth participation (required for all ages): In the event of an emergency I grant permission for emergency medical treatment to be given and I agree to pay all medical bills not covered by the insurance company listed below. I release the Hockinson School District from responsibility for any bills resulting from injuries incurred in these programs. I also give my permission for my child to be photographed and for such photographs to be released for publicity purposes. While no sports physical is required for my child to participate, I understand that my child should be in good physical condition appropriate to the activity, and that a current physical exam is strongly recommended. I have listed information regarding allergies or other medical conditions about my child of which staff should be aware.</small>					
<small>By signing this, I have read and understood the WA State Concussion Law at http://www.cdc.gov/ConcussionInYouthSports/. Even though most concussions are mild, all concussions are potentially serious and may result in complications including prolonged brain damage and death if not recognized and managed properly. For current and up-to-date information on concussions you can go to: http://www.cdc.gov/ConcussionInYouthSports/. I have also read and understood the SCA Awareness Act at www.hockad.org/Parents tab-OSPI Services Sudden Cardiac Awareness Pamphlet for Parents, Students & Coaches- Sudden Cardiac Arrest Awareness.</small>					
Insurance Co. _____		Parent Signature _____		Date _____	
Class Title	Class #	Start Date	Day	Time	Fee
Indoor Soccer (K-2)	4012-20	Aug. 3	M-Th	9 am	\$99
Indoor Soccer (3-5)	4013-20	Aug. 3	M-Th	1 pm	\$99