



Top Flight Soccer Camp

2021 Mail-In REGISTRATION

(This is an overnight camp)



Oliver Weiss
c/o Top Flight Soccer
11809 Decour Court
Fairfax, Va. 22030
Phone: 571-499-1449
Email: tfsoccer123@gmail.com
URL: www.topflightsoccer.org

Top Flight Soccer Camp

at Sweet Briar College
for Boys and Girls, ages 9-15

TODAY'S DATE: ____/____/____ Please check (✓) session(s): ____ July 7-10, 2021

First Name:	M.I.:	Last Name:
Address:	City:	State: Zip:
Check what applies: Gender <input type="checkbox"/> Male, <input type="checkbox"/> Female		
Date of Birth: ____/____/____ (MM/DD/YYYY) - Age in Camp: ____	Current Soccer Club: _____	
Current grade in school: ____	Position(s): _____ Are you a GK? Yes No	
Parent(s) Name(s): _____ Does parent(S) live at same address as camper? Yes No		
Parent(s) Email(s): _____		
Parent(s) Phone(s): _____		
Emergency name & phone number (in case we cannot reach parent(s): _____		
Camper Preferences: (continue on back of sheet if need be)	Free Camp Shirt:	Would you like to: (circle)
Roommate(s) request(s):	Circle your size below	Order a ball? Yes No (\$20)
Teammate(s) request(s):	YS YM YL YXL S M L XL	Order an extra Shirt? Y N (\$20)

Health Information: (We will have a certified trainer on staff during camp.)	
List any health issues or concerns the camper has:	
Medications camper takes:	
Does Camper self-administer medication? Yes No	
Last known Tetanus Shot: ____/____/____ (MM/DD/YYYY)	
Any other relevant Health Information:	
Insurance Company Name:	ID #
Name of Insured:	Group #

CHECKOUT and Mail-in INSTRUCTIONS:

1. Complete Registration (Page 1) and Waivers (Page 2 & 3).
2. Calculate your camp fee total on the right hand side.
3. Attach check or money order made out to Top Flight Soccer.
4. Mail forms and payment to address below:
Oliver Weiss, c/o Top Flight Soccer
11809 Decour Court, Fairfax, Va. 22030

After acceptance into the Soccer Camp, you will receive:

1. An acceptance email w/ remaining balance (if you have any)
2. A 2nd email about 10 days before camp w/ more details.
3. Check-in time on first Day is between 11 AM and 1 PM.
4. Check-out time on last Day is between 11 AM and 12 noon.

Camp Fee Calculator:

Registration Fee per session:

Early Bird Fee	Before June 1, 2021	\$475
Regular Fee	June 1 – 30	\$500
Late Fee	After July 1	\$525

Optional Services:	Camp Ball	\$20
	Extra Camp Shirt	\$20

Add all items together for

TOTAL COST: _____

Camper's Name: _____

Top Flight Soccer Camp – General Waiver & Consent Form

1. I/we, the undersigned, hereby certify that I/We, am/are the parents or legal guardians of the participant on this form. I/we hereby give permission for the camp staff to seek, during the period of camp, appropriate medical attention for the participant, for the attention to be given to the participant, and for the participant to receive the medical attention and treatment including that which is not covered by the soccer camp's excess medical coverage policy and including the soccer camp's policies' deductible.
2. I/we, the undersigned, understand that soccer is an active, physical sport and that injuries can occur. I/We assume all known and unknown risk of injury to my/our child. I/we also understand that there will be more participants than camp staff at the camp. I/We hereby acknowledge that my/our child is physically fit and mentally capable of participating in soccer and all Academy activities.
3. I/we, the undersigned, hereby acknowledge and understand the Top Flight Soccer Camp is a privately run sports camp and is not operated by or through Sweet Briar College. The camp is neither sponsored, controlled, nor supervised by Sweet Briar College, but rather is under the sole sponsorship, control, and supervision of the Hasenpfeffer, Inc., t/a Top Flight Soccer and Top Flight Soccer Camps.
4. I/we hereby also give permission to Top Flight Soccer and its directors to use any photographs taken of my child during soccer related camp activities as they see fit. This includes promotional items such as camp brochures, camp website, etc.
5. I/we waive, release, and discharge the Top Flight Soccer Camps, Oliver Weiss, Sweet Briar College, and the aforementioned staffs, officers, agents, employees, representatives, successors, and assigns for any and all liability claims, demands, actions, and causes of action whatsoever arising out of or related to any loss, personal injury or property damage that may be sustained or occur during the participation and camp activities or while at the camp.

Top Flight Soccer Camps - Rules Agreement/Acknowledgement

By signing below you and your child acknowledge, understand, and agree to abide by the rules of this soccer camp. Violating these rules may result in immediate dismissal from the camp without a refund.

1. Dangerous objects, weapons, drugs, or alcohol are not permitted.
2. Camp participants shall only be present in locations designated as camp space such as designated soccer fields, dormitories, and on-campus dining facilities.
3. Bullying, intimidation, or abusive behavior toward any person(s) is not permitted.
4. Visitors or friends of camps participants are not permitted in the dormitories except with special prior permission from the Camp Directors.
5. No participants shall destroy property or engage in reckless behavior.
6. Academy participants shall follow the directions of Top Flight Soccer coaches and staff at all times.

My/our signature(s) and/or electronic agreement(s) indicate(s) that I/we have provided true information on the registration form and have read and understand all waivers and consent forms and the statements on this page.

Signature of Parent/Legal Guardian of Camper listed above

Date

Print Name of Signer(s)

COMMUNICABLE DISEASE/COVID-19 RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT

Participant's Name _____ Birthdate _____
 Street Address _____ City _____ Zip _____
 Parent/Guardian's Name _____ Emergency Phone (____) _____
 Parent/Guardian's Name _____ Emergency Phone (____) _____

In consideration of being allowed to participate in any way in the Top Flight Soccer Camp programs, related events, and activities, I the undersigned, on behalf of myself and my participating children or guardians, acknowledge, appreciate, and agree that: I am aware there are risks to me of exposure to directly or indirectly arising out of, contributed to, by, or resulting from an outbreak of any and all communicable disease, including but not limited to, the virus "severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)", which is responsible for Coronavirus Disease (COVID-19) and/or any mutation or variation thereof.

Participation in Top Flight Soccer Camp programs, events, and activities involves the potential exposure to, and illness from infectious, communicable diseases, including COVID-19. While following Federal and State guidelines, Virginia Youth Soccer Association "Return to Play" Guidelines, and Top Flight Soccer Camps COVID-19 Protocol may reduce the risk, THE RISK OF SERIOUS ILLNESS AND DEATH DOES EXIST. Top Flight Soccer Camps CANNOT, AND DOES NOT GUARANTEE, WARRANT, OR REPRESENT THAT PARTICIPANTS WILL NOT CONTRACT A COMMUNICABLE DISEASE, INCLUDING BUT NOT LIMITED TO COVID-19, AS A RESULT OF PARTICIPATION IN ITS PROGRAMS, EVENTS, OR ACTIVITIES.

I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, HOLD HARMLESS, AND FOREVER DISCHARGE Top Flight Soccer Camp programs, Sweet Briar College, its officers, officials, agents and/or employees, other participants, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event (RELEASEES), from any and all claims, demands, losses, liability, rights, or causes of action of whatsoever kind arising out of, or in any way connected to or related to any ILLNESS, INJURY, DISABILITY, DAMAGES OR DEATH I may suffer or sustain as a result of my participation in Top Flight Soccer Camp programs, events or activities, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

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 SIGNING IT, ACKNOWLEDGE THAT IT CONSTITUTES A BINDING AGREEMENT AND PROMISE, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

X _____
Participant's Signature Age _____ Date _____

FOR PARENTS/GUARDIANS OF PARTICIPANT OF MINOR AGE (UNDER AGE 18 AT TIME OF REGISTRATION)

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liability incidents to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

X _____
Parent/Guardian Signature Date _____ Emergency Phone Number(s) _____