



Boys High School Team Camp \$305.00 • June 18-21 & July 9-12



Girls High School
Team Camp
\$285.00 • July 16-19

## **Past Camp Participants**

Hurricane, George Washington, Huntington, Jackson, Boyd County, Circleville, Waverly, Zane Trace, Amanda Clearcreek, Peebles, Alexander, South Webster, Athens, Gallia Academy, Point Pleasant, John Adams, Greenup County,

**Ohio Valley Christian** 

The University of Rio Grande takes the coronavirus threat very seriously and will continue to work to mitigate the spread of COVID-19 on the Rio Grande campus. All camps held on the Rio Grande campus are required to follow the Ohio Department of Health guidelines for camps and sporting events. You may find an updated list of guidelines at Responsible Restart Ohio | COVID-19. All campers will be made aware of current and updated guidelines at camp check-in. Any camper who fails to comply with COVID guidelines as while attending camp on the Rio Grande campus is subject termination from the camp without a refund.

## The Evan E. Davis Soccer Field



## **University of Rio Grande**

P.O. Box 500 • Rio Grande, Ohio 45674

Tony Daniels tdaniels@rio.edu 740.245.7493 voice • 740.645.0377 cell www.rio.edu

I wish to enroll in the Rio Grande Soccer Camp and abide by all the rules and regulations of the camp. The director or anyone else connected with the soccer camp will not be responsible for accidents, medical, dental or any expense incurred as a result of an accident. I hereby assume voluntarily any risk, accident or injury to myself as a result of participation in this program. Also, I grant the right to administer all medical services that may result in any participation, including emergency and referral if necessary.

## Please print in ink

Name:	Grade this fall:	Age:	
Home Address:	City:	State	e:Zip:
School:	County:		_ Camp T-Shirt Size:
Parent/Guardian Signature:			
Cost of Camps: Boy's Residential Camp – \$305 Girl's Residential Camp – \$285  Make checks payable to: We Storm Soccer Camps • URG Lyne Center • P.O. Box 500 • Rio Grande, OH 45674			
Medical Information Please check to indicate yes or no after each statement.			
1. Are you allergic to any medication?			ications? ☐ Yes ☐ No
3. Do you have asthma? ☐ Yes ☐ No			
4. Do you have any medical conditions we need be aware of?			
Emergency Authorization Information: Parents Work Phone:		Camper's Socia	l Security #:
Camper's Insurance #:	Policy #:		
Additional Information:			