

11<sup>th</sup> Annual



# Holiday Soccer Camp

## DECEMBER 26-29, 2008

### TIME

- Dec. 26, 3:00pm-6:00pm,  
check-in starts from 2:15pm
- Dec. 27-29, 9:00am-3:30pm,  
supervision from 8am-4pm

### AGES

**5-14 yrs old, boys & girls**  
 AYSO, HYSA, US Club players welcomed.  
 Participants grouped by age and/or ability.

### LOCATION Waialae Iki Park

Kalaniana'ole Hwy near Kalani H.S.

*All participants should bring their own ball, soccer shoes, shin guards, sunscreen, water and lunch. Lunches & balls must be pre-purchased with registration.*

### COST(S)

- Early-Bird Registration: **\$200**  
Must be received prior to Dec. 1<sup>st</sup> 2008
- Standard Registration: **\$225**  
Dec. 1<sup>st</sup> - Dec. 25<sup>th</sup>
- Walk-Up Registration: **\$250**  
Dec. 26<sup>th</sup> and after...
- Camp Group Photo **\$10**
- Additional Camp T-Shirt **\$12**
- Camp Soccer Ball **\$15**
- Lunch Service (3 days) **\$16**

### PAYMENT

Mail-In Check, Money Order & Credit Cards (MasterCard VISA) accepted

Returning to this year's ProXtreme Camp are Hawaii's very own professional soccer players:

- BRIAN CHING** (Houston Dynamo/MLS)
- DUKE HASHIMOTO** (Atlanta Silverbacks/USL-1)
- KENJI TRESCHUK** (Seattle Sounders/USL-1)
- MELE FRENCH** (Pali Blues/WPL)

Also joining the Hawaiian soccer pros are MLS stars **CLINT MATHIS** (Real Salt Lake), **RICHARD MULROONEY** (Houston Dynamo) and possibly more! 40+ collegiate players will support the nationally certified coaching staff provided by the Honolulu Bulls Soccer Club.

## For Boys & Girls Age 5 - 14



Brian signs camper's ball



Duke demos

ON-LINE REGISTRATION AVAILABLE AT  
[www.hawaiisoccercamps.com](http://www.hawaiisoccercamps.com)

## Mail-in Registration Form

Registration Type		Extras	
<input type="checkbox"/> Early-Bird	\$200	<input type="checkbox"/> Camp Photo	\$10
<input type="checkbox"/> Standard	\$225	<input type="checkbox"/> Extra T-Shirt	\$12
<input type="checkbox"/> Walk-Up	\$250	<input type="checkbox"/> Camp Soccer Ball	\$15
<input type="checkbox"/> Donation	\$	<input type="checkbox"/> Lunch Plan	\$16

Name \_\_\_\_\_

Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade \_\_\_\_\_

Male | Female T-Shirt YM YL YXL AS AM

Guardian Name \_\_\_\_\_

Home Address \_\_\_\_\_

City, State \_\_\_\_\_ Zip \_\_\_\_\_

☎ ( ) - Cell ( ) -

Email \_\_\_\_\_

Emerg Contact \_\_\_\_\_

☎ ( ) - Relationship \_\_\_\_\_

Family Physician \_\_\_\_\_

☎ ( ) - Med. Plan \_\_\_\_\_

Grand Total \$ \_\_\_\_\_

### Method of Payment

- Check  Money Order
- MasterCard  VISA

Credit Card No. \_\_\_\_\_

Signature \_\_\_\_\_ Expiration \_\_\_\_\_

### Medical Consent

I certify that my child is in good physical health and has my permission to participate in all activities of the Pro-Xtreme Camp. I acknowledge that soccer is a strenuous activity and that it poses some inherent risk of injury. I hereby give consent for emergency medical care prescribed by a duly licensed Doctor of Medicine or Dentistry. This care may be given under whatever conditions are necessary to preserve the life, limb or well being of my child. I waive all claims of liability against the Pro-Xtreme Camp, its directors, employees, sponsors and associated staff members.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Detach and mail with payment (payable to):

**ProXtreme Camp**  
P.O. Box 240277  
Honolulu, HI 96824-0027

Any questions? e-mail or call us at  
[info@hawaiisoccercamps.com](mailto:info@hawaiisoccercamps.com) (808) 561-4663

日本語でのお問い合わせは 5 4 2-8 5 4 8 へどうぞ