

# SPRING BREAK SOCCER CAMP

Full-Day & Half-Day Sessions available for all skill levels (age 5-12)

**Week 1: 3/15~3/19**

**Week 2: 3/22~ 3/26**

**at Kapiolani Park**



**<Typical Daily Schedule:>**

8:45am - 9:00am	Morning Check-in
9:00am - 9:30am	Warm-up & Overview
9:35am - 10:20am	Morning Training
10:20am - 10:30am	-----Break-----
10:30am - 11:15am	Morning Games
11:15am - 11:20am	-----Break-----
11:20pm - 12:00am	Morning Activity
12:00pm - 1:00pm	Morning Pick-Up Lunch
12:45pm - 1:00pm	Afternoon Check-in
1:00pm - 1:15pm	Warm-up & Stretch
1:15pm - 2:00pm	Afternoon Training
2:00pm - 2:10pm	-----Break-----
2:10pm - 2:50pm	Afternoon Games
2:50pm - 3:00pm	-----Break-----
3:00pm - 3:45pm	Afternoon Fun Activity
3:45pm - 4:00pm	Daily wrap up & Pick-up

\*Schedule may vary at staff discretion.

**<Campers Should Bring:>**

- size 3 or 4 soccer ball
- appropriate foot-wear & shin guards
- sunscreen, snack, & water

Campers staying for a full day session must bring lunch  
Camps will be held rain or shine  
(subject to City and Council of Honolulu regulations)



日本語のご案内は 542-8548 までどうぞ。

For more information, please call 561-4663  
or email at: [info@hawaiisoccercamps.com](mailto:info@hawaiisoccercamps.com)

Register On-line at [www.hawaiisoccercamps.com](http://www.hawaiisoccercamps.com)

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NAME: \_\_\_\_\_

DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ Male / Female SHIRT SIZE \_\_\_\_\_

GUARDIAN(S): \_\_\_\_\_

HOME ADDR: \_\_\_\_\_

CITY, STATE: \_\_\_\_\_ Zip \_\_\_\_\_

PHONE: ( ) \_\_\_\_\_ - \_\_\_\_\_ CELL: ( ) \_\_\_\_\_ - \_\_\_\_\_

EMAIL: \_\_\_\_\_  WEEK 1  WEEK 2

Full Day (\$150)  Morning (\$120)  Afternoon (\$120) per Week

\*full week campers will receive a camp T-shirt

**Daily Rate:**  Full Day (\$40) x \_\_\_\_\_  Half Day (\$30) x \_\_\_\_\_

Extra T-shirt (\$12)  Camp Photo (\$10)  Family Discount (-\$5/child)

Mail to: **HAWAII SOCCER CAMPS**  
P O BOX 240277  
HONOLULU, HI 96824-0277

**TOTAL: \$** \_\_\_\_\_

EMERG. CONTACT: \_\_\_\_\_

CELL: ( ) \_\_\_\_\_ - \_\_\_\_\_

MEDICAL CONDITIONS: \_\_\_\_\_

**MEDICAL CONSENT**

I certify that my child is in good physical health and has my permission to participate in all activities associated with hawaiisoccercamps.com. 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 Honolulu Bulls Soccer Club, its directors, employees, sponsors and associated staff members.

Signature \_\_\_\_\_

Date \_\_\_\_\_