



# Bellevue College Women's Soccer 2015 Fall ID Camp

Bellevue College Women's Soccer program would like to invite current high school seniors to attend the 2015 Sr. College ID Camp. This event will be instructed by women's head coach Daniel Lock. This is a great opportunity to be recruited and be considered as part of the recruiting class of 2016 for the Bulldogs.

**DATE**: Sunday October 25<sup>th</sup> – 11am-1pm

**LOCATION**: Bellevue College Soccer Field - 3000 Landerholm Circle S.E. Bellevue, WA 98007

<u>COST</u>: \$10

## **SCHEDULE OF EVENTS: Sunday Oct 25th**

- 10:30am: CHECK IN @ BC Soccer Field With Waiver and payment
- 11am-11:10am: Warm-Up
- 11:10-11:30am: Technical Training
- 11:30-12:10: Small Sided
- 12:10-12:50pm: 8v8 / 11v11
- 12:50-1pm: Cool Down / ID Camp Wrap-Up

### CONTACT COACHING STAFF FOR MORE INFORMATION:

Daniel Lock Bellevue College Women's Soccer Head Coach 3000 Landerholm Circle S.E. Bellevue, WA 98007

Tel: 206-406-5855 dan.lock@bellevuecollege.edu

**REGISTRATION:** Email <u>dan.lock@bellevuecollege.edu</u> to RSVP and complete following registration form.

BELLEVUE COLLEGE ATHLETICS \* 3000 Landerholm Circle SE \* Bellevue, WA 98007

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### **REGISTRATION FORM**

Complete all information. Form can be turned in day of ID Camp or via email or mail.

#### PLAYER INFORMATION

NAME		AGE/DOB
CLUB TEAM	POSITION(S):	
HIGH SCHOOL	HS GRAD YR	
ADDRESS		ZIP
HOME PHONE	CELL PHONE	
EMERGENCY PHONE	RELATIONSH	IP
PAYMENT OPTIONS		
	1 X VC	
Check (payable to "Bellevue College Wor	men's Soccer")	
RELEASE OF LIABILITY		
I understand and agree that the participation of my chil understand and agree that Bellevue College is not liabl	le for any injury, damage, or other loss	which my child may cause or incur, c

understand and agree that Bellevue College is not liable for any injury, damage, or other loss which my child may cause or incur, or may cause others to incur, while using college facilities or equipment. I authorize all medical, surgical, diagnostic, and hospital procedures as may be performed or prescribed by a treating physician for my child if I cannot be reached in any emergency. I further agree that neither I nor my child will bring any claims of any kind against Bellevue College and/or its soccer camp employees as a result of any injuries, expenses or damages that I or my child may suffer in connection with my child's participation in the camp, whether such claims are known or unknown or arise in the future.

PARENT/GUARDIAN NAME (Please print) \_\_\_\_\_

SIGNATURE \_\_\_\_\_

DATE

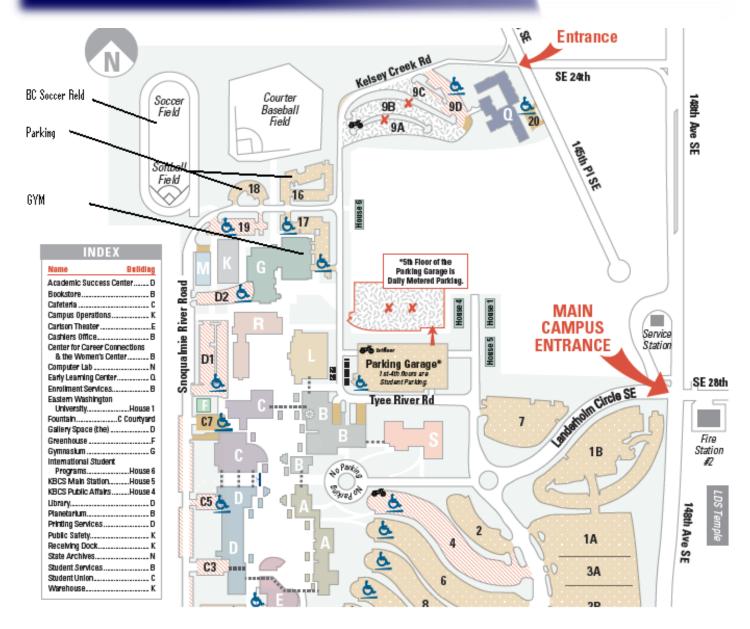
#### SEND COMPLETED REGISTRATION FORM AND PAYMENT TO:

Bellevue College Women's Soccer 3000 Landerholm Cir SE MS G100 Bellevue, WA 98007

OR EMAIL FORM TO: <u>dan.lock@bellevuecollege.edu</u> and bring payment on the day of camp.

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Directions to Main Campus: From Seattle

Follow I-90 eastbound. Take Exit 11A towards Eastgate Way. Follow signs for 156<sup>th</sup> Ave SE & merge onto 150<sup>th</sup> Ave SE. Continue onto 148<sup>th</sup> Ave SE and turn left on SE 28th St.

#### From Issaquah

Follow I-90 westbound to Exit 11. After exiting, follow the signs for 156th Ave SE. At the stoplight, turn left onto Eastgate Way. Move into right lane and turn right at 150<sup>th</sup> Ave SE. Merge onto 148<sup>th</sup> Ave SE and turn left on SE 28<sup>th</sup> St.