

NAME: _____ AGE: _____

Last First M.I.

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

PARENT/GUARDIAN: _____ E-MAIL: _____

PHONE NUMBERS: (H): _____ (W): _____ (C): _____

GRADE IN 2011/2012: _____ SCHOOL: _____

YEARS PLAYING SOCCER (circle one): 1 2 3 4 5 6 7 8 9 10 11 Never played

T-SHIRT SIZE (circle one): Youth S M L XL Adult S M L XL BALL SIZE (circle one): 4 5

PARENT/GUARDIAN SIGNATURE: _____

Registration
Deadline:
NONE!
(Contact Coach
Dowdy for
registration
after June 9)

* Each Camper will fill out a Medical History Form the first day of camp.

Please return this application along with payment (check or cash) to:

Chris Dowdy * 3825 Park Ln. * Roanoke, VA * 24015



Patrick Henry Patriots Men's Soccer

2012 Varsity Schedule

	Date	Opponent	Time
Tue	3/13	vs. Staunton River	7:00
Fri	3/16	@ Science Hill	7:00
Tue	3/20	@ Jefferson Forest	7:00
Fri	3/23	vs. Frank W. Cox	6:00
Tues	3/27	vs. Blacksburg	7:00
Mon	4/2	vs. Halifax County	7:00
Tues	4/3	@ Salem	7:00
Tues	4/17	@ Franklin County	7:00
Fri	4/20	vs. G.W. Danville	7:00
Tue	4/24	@ Halifax County	6:30
Wed	4/25	vs. E.C. Glass	7:00
Sat	4/28	vs. James Wood	2:00
Tue	5/1	vs. William Fleming	7:00
Fri	5/4	vs. Franklin County	7:00
Tue	5/8	@ G.W. Danville	7:00
Thu	5/10	@ William Fleming	7:00

www.phboosters.org

*Home games in bold (at Patriot Stadium)

DON'T FORGET!
For the latest information on the

7th Annual
PATRIOT GOLF TOURNAMENT
Please visit:
www.phboosters.org

PATRIOTS SOCCER CAMP 2012

JUNE 11 - 14

MONDAY - THURSDAY

5:00 PM TO 8:00 PM



BOYS and GIRLS

Grades K - 8

at Patrick Henry High School

(Patriot Stadium-Gainer Field)

Developing the attitude, skills
and courage to play the game.

CAMP GOAL

The main goal of the Patriots Soccer Camp is to continue to develop the fundamental skills of soccer in a competitive and appropriate atmosphere while instilling the values of good sportsmanship and having fun.

CAMP STAFF

Each year, we are extremely fortunate to have a very qualified staff of volunteers—almost all of which are affiliated with Patrick Henry Soccer. The **Camp Director** is Chris Dowdy, head coach of the men’s soccer team at Patrick Henry High School (8th season). Coach Dowdy will be joined this year by Patriots’ assistant coaches Craig Sowers, Felix Bruno-Gaston and Ryan Kennedy.

This year’s camp staff will also be composed of both former and current Patrick Henry soccer players.

COST INFORMATION

COST: \$75 for the entire camp (4 days).

Check or cash payment will be accepted. Make checks payable to: **Patrick Henry Men’s Soccer**

*Contact Coach Dowdy for late registration.

Mail registration and payment to Coach Dowdy at:

3825 Park Ln.
Roanoke, VA 24015

OR at Patrick Henry High School at:

2102 Grandin Rd.
Roanoke, VA 24015
ATTN: Chris Dowdy

CAMP SCHEDULE

4:45 - 5:15	Registration/Drop-off
5:15 - 5:40	Light warm-up w/ stretching
	Warm-up games
5:40 - 6:20	*Skill Development
6:20 - 6:25	BREAK
6:25 - 6:55	*Skill Games
6:55 - 7:05	BREAK and Team Organization
7:05 - 8:00	GAMES
8:00 - 8:15	Pick-up

*Skill Development and Skill Games sessions are combined - each day, *dribbling, passing* and *receiving* skills will be taught and different games will be played after the skill has been drilled to reinforce the particular skills. Aspects of these skills include:

Dribbling technique - dribbling for possession, dribbling to attack, left/right foot, utilizing all parts of the foot

Passing technique - basic fundamentals, utilizing different parts of the foot, short passing, long passing, one/two touch passing

Receiving technique - basic fundamentals, utilizing different parts of the body to receive the ball, first-touch emphasis

Shooting and Finishing technique - one-touch finishing, shooting from distance, volleying

WHAT CAMPERS SHOULD BRING

- Shorts, T-shirt and extra socks
- Shin guards
- Cleats
- Tennis shoes
- Water bottle

Medical Release Form

*Please complete the following form along with the registration form (on back) and turn in with payment. This form **MUST** be completed before camp participation.

NAME: _____ AGE: _____

_____ M.I. _____

_____ First _____ Last

Please list any significant medical injuries or illnesses that we should be aware of: _____

Does your child require medication? YES / NO (circle one) If so, please list: _____

Any allergies to medicines? YES / NO (circle one) If so, please list: _____

Emergency Contact NAME: _____ Phone 1: _____ Phone 2: _____

I understand the inherent risks involved in my son/daughter participating in soccer. By signing this form, I waive the liability of Patrick Henry High School and/or Patriots Soccer Camp for any injuries sustained by my son/daughter while participation in Patriots Soccer Camp 2012. I also understand that the Patriots Soccer Camp staff will initiate any appropriate medical attention that my child may require to the best of their legal ability.