

2014 Lansing Recreation Annual Soccer Camp

Date: August 11^h-15th

Time: 8:30-4:30 Grades 3-10/ 9:00-12:00 Grades K-3

Location: Town Hall Fields

Ages: Boys and Girls entering grades K-10

Cost: \$90 Full Day / \$40 Half Day (K-3)



Camp Director Adam Heck is the Boys Varsity Soccer Coach at Lansing High School. He is entering his 19th season as a varsity coach. During his eighteen years at Lansing Coach Heck has guided his teams to 17 straight winning seasons, consisting of over 250 victories, nine division titles, four league championships, 6 sectional titles, three regional titles, 2 state finalist, and 11 top twenty final state rankings. Coach Heck was named NSCAA New York State Coach of the Year for 2007 and 2012. He was named 2012 east regional coach of the year and was a finalist for 2012 National coach of the year. He was name NFHS 2013 New York State, Regional Coach of the year. In 2006 his Empire State Game’s Scholastic Boys Soccer team won the gold medal.

The staff will consist of highly qualified coaches and players ranging from college coaches and players to high school coaches and players. The camp offers young players the chance to improve their overall game. Both offensive and defensive skills and strategies will be taught, as well as a separate keeper training session for those interested in that area. There is no question that this camp will teach the fundamentals of the game. Every day there will be a guest speaker ranging from all levels of soccer (including male and female coaches and players). At the end of the week each camper will receive a **camp T-shirt**.

***Each camper is responsible for bringing cleats, shin-guards, water and lunch.**

Registration

Name: _____ T-Shirt Size: _____
D.O.B. _____ Age: _____ Grade: (fall’14): _____
Address: _____
Parent’s Name: _____
Home Phone: _____ Work Phone: _____
E-mail: Address: _____
*Person to contact in emergency, (other than Parent or guardian):
Name: _____ Phone: _____
Family Physician: _____ Phone: _____
*Medical Problems/Conditions: _____

-I hereby give permission for my child to participate in the program designated and in the event of illness or injury, to be treated by emergency personnel or at a local medical facility. I also agree not to hold the Town of Lansing or anyone associated with the program liable for any injury or illness as a result of participation in this program.

Parents Signature: _____

(Checks payable to Lansing Recreation)

Return to:

**Lansing Recreation Department
29 Auburn Rd.
Lansing, NY 14882**