

2016 Lansing Recreation Annual Soccer Camp

Date: August 8th-12th

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 Lansing Boys Varsity Soccer Coach. Entering into his 21st season as the varsity coach, Coach Heck has guided his teams to many accolades consisting of: 19 straight winning seasons (consisting of over 300 victories), 11 division titles, 4 league championships, 8 sectional titles, 4 regional titles, 3 state finalist, and 13 top twenty final state rankings. Coach Heck was named NSCAA New York State Coach of the Year in 2007 and 2012, and named 2012 East Regional Coach of the Year and a finalist for 2012 National Coach of the Year. In 2013, he was named NFHS 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 offensively and defensively, as well as a separate keeper training session for those interested. 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'16):** _____

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