



# Citrus United Soccer League

9am – 12pm and 5pm-8pm July 26<sup>th</sup> – 30<sup>th</sup> 2010

Held at HOLDEN PARK

The **B.E.S.T.** U.K./U.S. Staff offer the cutting edge of modern soccer training. Every **B.E.S.T.** coach has the ability to capture the imagination of each individual player. The training program is a well-thought out and structured program that permits players to take their game to the next level. At **B.E.S.T.**, we simplify the game of soccer in an environment that is both enjoyable and disciplined.

Our goal is for each player to feel they have achieved something every time they train. We teach them to become team players with correct decision making and to play the simple game. The **B.E.S.T.** program is for all ages and covers all aspects of the modern game.

*Ahead of the game!!*



### Schedule

Monday - Friday  
July 26<sup>th</sup> – July 30<sup>th</sup> 2010

### Sessions & Cost

- Time: 9am-12pm and 5pm - 8pm
- Cost: \$99 per player

Check with your coach to see about team training

**Return Application and Full Payment to:**

**Make Check Payable to: BEST**

**Wayne Canfield – Director of Coaching**

**Address here: 6415 E. Lowden St.**

**Inverness, FL. 34452**

*For more information about the B.E.S.T Soccer Camps contact:*

**Wayne Canfield: 352-302-2640**

**Email: [usabestsoccer@gmail.com](mailto:usabestsoccer@gmail.com)**

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## APPLICATION FORM

### Application Form:

**Player's Name:** \_\_\_\_\_

**Age Group** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_

**Zip:** \_\_\_\_\_ **Phone:** (\_\_\_\_) \_\_\_\_\_

**Emergency Phone:** (\_\_\_\_) \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Email:** \_\_\_\_\_

### **Parental release:**

This is to certify that my child \_\_\_\_\_ has my permission to participate in the British European Soccer Training (**B.E.S.T.**) training and all the activities therein. I hold harmless B.E.S.T., Inc., any instructors, participants, and any camp staff from all and every manner of action, cause of action, suits, debts, sums of money, contracts, damages and demands whatsoever, in law or in equity arising from participating in any activity whatsoever related to the B.E.S.T., Inc. soccer camp. I understand that participating in the sport of soccer carries with it risk of bodily and mental injury. I have assumed these risks voluntarily and accept them. I understand that participation in the **B.E.S.T.** camp is voluntary and I have the right to leave at any time. Furthermore, this verifies that my child is current with his/her immunizations and is physically able to participate in the camp.

**Parent Signature** \_\_\_\_\_