

SS.CONSTANTINE & HELEN

J.O.Y. SOCCER

2010

**"MIGHTY MIGHTS"  
CAMP**

**PRE-SCHOOL – 1<sup>st</sup> GRADE**

**\$80 Registration Fee**

Players must provide their own shin guards in order to play and practice.  
(NO EXCEPTIONS) Spikes are recommended instead of athletic shoes.  
(If inclement weather occurs, camp will be held in gymnasium.  
Please bring athletic shoes on those days.)

**Mondays & Wednesdays from 4:00 – 5:00 p.m.**  
**(Beginning on April 26<sup>th</sup>)**

**There will be 9 camp sessions this year**

*This years camp will be conducted  
by "STP"*

**All children will receive a camp shirt along with a trophy  
and end of the year BBQ.**

**Forms & Fees are due on April 25<sup>th</sup>**

**\*\*For more information please email Jim Stavrou at  
JStavrou777@yahoo.com \*\***

**SS. Constantine & Helen Greek Orthodox Church**

**J.O.Y. 2010 Soccer Program - Registration Form**

(Ages: Girls and Boys Pre-School – 1<sup>st</sup> Grades - Forms must be returned before April 25<sup>th</sup>, 2010)

Please Print Neatly:

NAME:

ADDRESS:

CITY:

STATE:

ZIP:

TELEPHONE:

AGE:

BIRTH DATE:

EMERGENCY TELEPHONE:

WEIGHT:

GRADE IN SCHOOL:

PARENTS EMAIL ADDRESS:

**T-Shirt Size (Check One):**

Child's

Small

Medium (10-12)

Large (14-16)

**FEE THIS YEAR IS \$80- PAYABLE WITH THIS FORM BEFORE APRIL 25<sup>TH</sup>, 2010**

**PLEASE MAKE CHECKS PAYABLE TO SS. CONSTANTINE AND HELEN JOY.**

We, the parents (legal guardians) of the child above, do give our consent and approval for his/her participation in the SS. Constantine and Helen J.O.Y. Soccer Program. In consideration of our child's acceptance in said activity, we the undersigned do hereby agree to indemnify and hold harmless SS. Constantine and Helen Greek Orthodox Church of Palos Hills, IL., its priests, directors, officers, coaches and agents, without regard to any negligence on their part, against any claim for damages, compensation or otherwise including all losses and expenses caused to or by our child while participating in the JOY Soccer Program of SS. Constantine and Helen Greek Orthodox Church, Palos Hills, IL or arising of our child's participation in ATHLETIC PROGRAM.

We represent and warrant that our child has no health or medical condition which would prevent his/her participation in the SS. Constantine & Helen Program and that our child's participation in the said Athletic Program will not endanger or pose any hazard to his/her health.

Consent and give authority to obtain medical care and treatment for any and all injuries sustained as a result of participation in the SS. Constantine and Helen JOY Soccer Athletic Program.

**PARENTS MUST COMPLETE THIS INFORMATION & SIGN**

Insurance: (Hospitalization) Company.

Policy Number:

Drug Allergies, if any

Date:

Signature of Parent/Guardian:

**MUST BE A PAID STEWARD OF SAINTS CONSTANTINE & HELEN CHURCH TO BE ELIGIBLE TO REGISTER**

- Children must be in Pre-School, Kindergarten or 1<sup>st</sup> grade
- Players must provide their own shin guards in order to play and practice - - NO EXCEPTIONS.
- Children must be accompanied by parent. No children may be dropped off. We can not provide a sitting service.