17th Annual - Griffin Soccer Camp
July 30 – August 3, 2018

Griffin Soccer Camp is located at our 26 acres complex, The Donovan Catholic Athletic Complex, on Whitty Road, in Toms River, NJ (GPS: St. Joes Field)

For Girls and Boys
Date: July 30-August 3, 2018

Full Day: 9:00am-2:00pm
Grades 5-9 (as of Sept’18)
Please bring your lunch

Half Day: 9:00am-12noon
Grades 1-4 (as of Sept’18)
Please bring a snack

**Friday 8/3/18 camp will end at 12:00noon**

Cost:
• $165.00 per camper (Full Day)
• $125.00 per camper (Half Day)
($150.00 pre-register by 7/15/18)
($110.00 pre-register by 7/15/18)
INQUIRE ABOUT SIBLING DISCOUNTS (Cannot combine 2 discounts)

Please make checks payable to Donovan Catholic HS
Mail to: Donovan Catholic HS
711 Hooper Ave.
Toms River, NJ 08753
ATTN: Suzanne Estevez-Oliver

Phone: 732-349-8801 EXT: 2440

Individual and small group training also available. Please contact Ken or Suzanne Oliver at koliver@donovancatholic.org or soliver@donovancatholic.org

If you have any questions please email:
• Co-Director- Suzanne Estevez-Oliver (21st year) Head Girls Varsity Soccer Coach
soliver@donovancatholic.org
• Co-Director- Ken Oliver (18th year) Head Boys Varsity Soccer Coach
koliver@donovancatholic.org
Camper's Name ________________________________

Age ______  Grade (as of Sept. 2018) _______  Male OR Female______

Address _______________________________________

Email address ____________________________________________

Phone # ___________________________  Cell # ________________________

Shirt size (circle ONE)

Youth  S,  M,  L  

Adult  S,  M,  L,  XL

I will assume all responsibility for the injuries that my child may sustain during Camp attendance. I hereby authorize the staff of the Griffin Soccer Camp to use their best judgment in any emergency requiring medical attention and hereby waive and release the “Griffin Soccer Camp” from any injuries or illness to my child while attending the camp.

_________________________________________________________
Signature of parent or guardian

Date ______________________

If there are any medical concerns about your child that you want our staff to know about please list them in the space provided below on the registration form.