

2003

Playmakers Soccer Camp

<p>Camp Director Mike Combs (513) 561-1398 H (513) 543-8596 C playmakersacademy@hotmail.com</p>
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2nd annual "Playmakers Soccer Camp" will be held this summer **June 16-20** or **June 23-27**.

Camp Philosophy

The "Playmakers Soccer Camp" believes in sharing the fun and excitement of the game to all ages. Safe participation, skill development, and teamwork are emphasized through small group games and exercises. Our goal is to expose both boys and girls to new ideas in the game of soccer as well as to improve technical and tactical play through daily repetition. Campers will be grouped according to age, ability, and physical maturation.

Coaching Staff

Mike Combs and Tim Sakelos will direct the training sessions with organization assistance from local college soccer players! The staff will provide the knowledge, enthusiasm and environment to elevate your level of play!

Location

Fairfax Lower Soccer Field

Time

Boys/Girls Ages 5-9

9AM-12PM

Cost

\$50

Boys/Girls Ages 10-15

9AM-3PM

What to Bring?

- | | |
|-------------------------|---------------------------------|
| 1. Plenty of cold water | 4. Swim Towel |
| 2. Soccer Ball | 5. Sunscreen Lotion |
| 3. Shin Guards | 6. Lunch (10-15 year olds only) |

Make checks payable to:

"Playmakers Soccer Camp"

Mail to: Mike Combs

7233 Rita Ln
Cincinnati, OH 45243

Cut -----

***Please pre-register**

Registration forms will be accepted even on the first day of each camp week.

Name: _____ School: _____

Home Address: _____ City: _____

State: _____ Zip Code: _____ Home Phone: (____) _____

Email: _____ Grade: _____ (2003-2004 School Year)

Male: _____ Female: _____ Age: _____

T-shirt Size YS _____ YM _____ YL _____ AS _____ AM _____ AL _____

Please Check One Week 16-20 _____ Week 23-27 _____

Please see back of page

Camp Director
Mike Combs

- *Graduate of Northern Kentucky University
- *Played Division II Soccer at NKU
- *Graduate of Mariemont High School
- *USSF National Coaching License

Coaching Experience:

- *Cincinnati State 2002-Present Men's Head Coach
- *Earlham College 2001
- *Cincinnati State 2000
- *Mariemont H.S. '92-'95 & '98 ('98 District Champions)
- *Indian Hill H.S. '96 & '97 ('96 & '97 CHL Champions)
- *(ODP) Olympic Development Program Boys/Girls 2000-'03
- *OHIO SOU Head District Coach '01 - '03
- *OHIO SOUTH State Staff
- *Super Clubs U-17 U.S. National Team 2003-England

Club Soccer Boys/Girls:

- *Cincinnati Classics Hammer Boys U-16 & U-17
- *Madeira/Indian Hill Club Boys U-12 to U-16
- *West Side Soccer Club Boys U-12 to U-15
- *MTSC Scorpions Girls U-15
- *Mariemont Soccer Club Girls U-12 to U-14
- *Madeira Soccer Club U-12 Boys
- *Sycamore Arsenal Boys U-8

Soccer Camp Experience:

- *Director of Playmakers Soccer Camps '02 & '03
- *Ohio Elite Soccer Camp 2002
- *University of Cincinnati Day/Night Camp '01 - '03
- *Ohio South/Soccer Unlimited '92 - '01
- *Ohio High School Team Camps '01 - '02
- *Columbus, IN Advance Soccer Academy 2001
- *Warrior Soccer Camp 1998

Memberships:

- *(NSCAA) National Soccer Coaches Ass. Of America
- *US Soccer Coaches Organization
- *(USSF) United States Soccer Federation

Medical Release

Name of child _____

I agree that the "Playmakers Soccer Camp" shall not be liable for any injury or loss, which my children may sustain while participating in this soccer camp, and I agree to indemnify and to hold harmless the "Playmakers Soccer Camp" from any claim whatsoever. The above applicant is in good health and has my permission to participate in this program. In case of emergency, I grant permission for my son/daughter to be given emergency treatment at a local hospital.

I agree, Signature: _____

Emergency Numbers: _____

Date (mm/dd/yy): _____

Please indicate any medical problems in the space provided:

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Location

Time

Cost

Drackett Soccer Field	Boys/Girls Ages 5-15	5:30PM – 8:30PM	\$50
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What to Bring?

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|-------------------------|---------------------|
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T-shirt Size YS _____ YM _____ YL _____ AS _____ AM _____ AL _____

Terrace Park Camp Week of July 21-25 _____

Please see back of page

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Emergency Numbers: _____

Date (mm/dd/yy): _____

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