



$2025 \, \text{Summer Camps/CLINICS} \\ \text{U8 - U14}$

Springfield FC along with F24 soccer will be hosting the following soccer camps this summer. If you are interested and would like to participate, we highly recommend submitting your registration as soon as possible. There are limited spaces; therefore we will be forced to close registration once we meet trainer per player ratio capacity.

A challenging and fun filled environment that will push every participant out of his or her comfort zone in order to reach individual peak performance no matter his or her skill level. Emphasis is placed on the development of our participant's technical skills, such as ball control, possession with the ball and field awareness.

Train, learn and improve your skills while enjoying the beautiful game of soccer.

U14 and over please contact: Harry Horozoglou (theoharis24@gmail.com)

2024 Camp Dates/General Information:

Dates	Times	Location	Cost
June 16 - 20	9am -12pm	CHURCH ROAD FIELDS	\$175 Per Participant
June 30 - July 3	9am -12pm	CHURCH ROAD FIELDS	\$175 Per Participant
August 4 - 8	9am -12pm	CHURCH ROAD FIELDS	\$175 Per Participant
August 11 - 15	9am -12pm	CHURCH ROAD FIELDS	\$175 Per Participant

Please pack a snack and bring plenty of water.

Areas of Training:

- 1. Individual skill development.
- 2. Executing a variety of turns and moves with the ball.
- 3. First Touch, Passing, Receiving, and Field Awareness.
- 4. Attacking, Defending, Shielding, Shooting
- 5. Finishing with small-sided games and or scrimmages.

For more information visit our website: **www.futbol24socceracademy.com** F24/Springfield FC Director Harry Horozoglou: **theoharis24@gmail.com**

Please Fill Out FC	RM BELOW and	email back to t	heoharis	24@gmail.com
Participant's Inform	nation (MUST Fill C	Out)		Parent/Guardian Information (if under 18)
Name:			Name:	
Date of Birth:/	/Age:	\checkmark F \square M \square	Email Ac	ldress:
			Phone #:	: (Home)
City:	State: Zip:		Phone #:	(Cell)
Emergency Conta	ct Information:			
				
	umber:			
	ticipant:			
V Pl	1.			
✓ Please select car	mp dates.			
Summer Camps:				
June Camp:	16,17,18,19,20	9am-12pm	(\$175)	
June/July Camp:	30,1,2,3	9am-12pm	(\$175)	
August Camp:	4,5,6,7,8	9am-12pm	(\$175)	
August Camp:	11,12,13,14,15	9am-12pm	(\$175)	
Plea	nse Read Carefully a	and sign the follo	owing Re	gistration-Understanding/Waiver.
Sessions and prograresponsibility for an Soccer Training Ilc/Sessions. I acknowle activities that may in may incur a risk of i Horozoglou and his to injuries or illness with no chronic illnemedical care, I give emergency medical not responsible for metal soccessions.	ms, and related event- y injury or accident we Springfield FC/Theoh- dge that F24 Soccer a nvolve, among other to njury. I specifically we staff, from all liability that I/they may sustall ess or abnormal tender F24 Soccer Training treatment/assistance in ny personal belonging on. F24 Soccer Traini	s, I the undersign which may occur taris Horozoglou Training Ilc/Sprinthings, physical covaive, give up and y for any claim form. In signing this encies. In the every llc/Springfield Form of the significance of the significanc	ned volunt to the abo or his star- ngfield FC contact wid d release I or damage s waiver, I nt of an er C/Theoha occer Train, stolen, o	g llc/Springfield FC/Theoharis Horozoglou training tarily agree to assume full and complete ove named child during or in connection with F24 ff while participating in any and all training C/Theoharis Horozoglou, I/they will participate in th persons or objects, including the ground, and F24 Soccer Training llc/Springfield FC/Theoharis es which I/the above named child may have relating I certify that I/the above child are in good health, mergency in which I/the above child requires ris Horozoglou and or his staff authority to seek ning llc/Springfield FC/Theoharis Horozoglou is r damaged. I agree to have all fees paid in full oharis Horozoglou reserves the right to cancel or
start of the camp ses		ocessing fee. Can	cellations	np, notification must be given two weeks prior to the swithin two weeks prior to the event are only edical reasons.
Print Name:				
Signature:				
*Please supply a co	ppy of your medical	insurance card	and infor	mation in case of an emergency.



REQUIRED EQUIPMENT

Shin Guards, Soccer Ball, Soccer Cleats, Slides, Crocks

Summer Camps/CLINICS

Photo Consent

F24/Springfield FC uses its website to provide current information, events and announcements. Our website is also used as an informative resource.

F24/Springfield FC posts participants pictures, team pictures and event pictures, etc.

F24/Springfield FC does not post any confidential or personal information on the website. F24/Springfield FC does not post the contact or address information of any participant's information publicly.

By signing this consent form you agree to allow F24/Springfield FC to display the participant's name and their image in team or event pictures that may be posted on our website.

F24/Springfield FC takes information and participant's safety and security very seriously. Please contact us if you have any questions:

Email: theoharis24@gmail.com or call us at 610-656-9618

I hereby give my consent for F24/Springfield FC to use my child's/pabe posted on the Futbol24 Soccer Academy/Springfield FC website's and the associated images or video.	
Participant's Name	-
Parent Name (print)	
Parent Signature	
Date	

Please sign/date and email this form