

FCGS
San Diego

Recreational
CHAMPIONS
League

Named after the European Champions League tournament, this program is designed to help beginner/recreational players learn the game of soccer through fun small-sided games-with all instruction provided by our professional coaching staff. Players will be placed onto teams named for those in the current Champions League and learn stories about their specific team and its history. Players should come with a soccer ball, plenty of water, and soccer-appropriate attire (shorts, top, soccer cleats, shin guards, and soccer socks).

All players will receive a t-shirt. • Plus, sign up for the upcoming fall rec league and get \$25 off! •

- Ages: 5 to 18 years (boys and girls)
- Saturday Sessions: Jan 27, Feb 3, 10, 17, 24 and March 2 from 9:00 am to 10:30 am
- Location: Mesa Verde Middle School: 8375 Entrenken Way, San Diego 92129

If paying by check - Make payable to SDFAC
Mail completed form and check to:
FCGS-SD Champions League
PO Box 721030
San Diego, CA 92172

Registration : \$180 or \$50 per day (Credit card payments will incur a 3% service fee.)

Sign up now at sdfa.elitesoccerclubs.com/camps or by mailing in this form.

Player name _____ DOB _____ School/Grade Fall 2023 _____
 Address _____ Parent/ Guardian name(s) _____
 City _____ State _____ Zip _____ Phone _____ T-shirt size: (circle) YS YM YL YXL AS AM
 Email _____

(cancellations must be made 7 days prior to the start of the league and submitted in writing to johnson@sdfacademy.com. An administration fee of \$10 will be applied to any cancellation. Media release: I, the parent/guardian of the player named herein, acknowledge that participation in soccer, CI in any sport, may result in injury. As the undersigned parent/guardian, I therefore release the San Diego Football Academy/ FC Golden State San Diego teams, agents, officers, coaches and players from all liability or responsibility for any claim damage or legal action on behalf of the player or the player's parent, heirs or personal representatives, arising from or on injury the player may sustain while participating in soccer or related activities, including transportation, except to the extent and in the amount covered by San Diego Football Academy/ FC Golden State San Diego insurance plan. Additional: CI the parent/legal guardian of the aforementioned player, I hereby give my consent for emergency medical care prescribed by a duly licensed Doctor of Medicine or Doctor of Dentistry. I understand this care may be given under whatever conditions are necessary to preserve the life, limb or well-being of my dependent.

Parent/ Guardian signature _____ Date _____