

**December 27-29, 2023.** 9am-Noon at Briarwood Acton Rd Field. "Shine" Matthew 5:16, featuring Briarwood Soccer Club staff and High School players

- Individualized professional soccer instruction
- Focus on being prepared for anything that happens in the game of soccer or in life
- Intentional focus on technical skill, soccer skill development
- Organized scrimmages daily
- Indoor and outdoor play for any weather
- \$80 Camp fee includes camp apparel

**Camp Staff:**

**Ryan Leib** played professionally for 8 years in the USL for the Atlanta Silverbacks and Charlotte Eagles, and is a nationally licensed coach. He holds the USSF B license and the NSCAA Premier Diploma. He is the director of coaching for Briarwood Soccer Club and Lady Lion varsity soccer coach at Briarwood Christian School, who are 9-time state champions. He has a passion for developing young soccer players.

**Shawn Marlow** has been with Briarwood Soccer Club since 2006. Coach Marlow coaches our competitive Lady Ambassador teams, trains our goalkeepers, and coaches for Briarwood Christian School in Birmingham. He holds the USSF National Youth Coaching license and USSF D coaching license as well as the NSCAA Level I GK license.

**Ambassador Soccer Camp Daily Schedule:**

- 8:45-9:00 Campers Arrive at gym
- 9:00-9:10 Individual warmup and juggling
- 9:10-9:30 Introduction, Group warmup and fun game
- 9:30-10:15 Skill session I
- 10:15-10:20 Water Break
- 10:20-11:10 Skill Session II/Video instruction
- 11:10-11:20 Break/Discussion/Devotions
- 11:20-11:55 Team Games/Indoor soccer
- 11:55-12:00 Wrap-up, dismissal

### **Equipment and Info**

- Soccer cleats, indoor shoes or sneakers, sweatshirt, sweatpants, warm hat , gloves, soccer ball, water bottle, light snack, face covering if you want
- We will be outside as much as possible so please dress appropriately.
- Extra water and medical first aid will be provided.
- Space is limited to first 50 applicants; please get your application in early!**

### **Age:**

Ambassador Soccer Camp is open to ALL boys and girls **age 7-12**.

### **Location:**

Camp will be held at Briarwood Acton Rd. Field and gym, located on the campus of Briarwood Presbyterian Church., 2200 Briarwood Way. Bham, AL 35243 Take I-459 to the Acton Rd. Exit. Turn toward McDonalds and take a right into Briarwood Church. Travel up the hill past Children's Hospital and take left into the church grounds. Drop off at the gym lobby each morning. Pick up at the soccer field, weather dependent.

## APPLICATION FORM

Detach and drop this form and \$80.00 for the cost of the camp (payable by cash or check, to Briarwood Soccer Club) to the Quest (Recreation) Office at Briarwood Presbyterian Church or mail to: Ambassador Soccer Camp, c/o Briarwood Soccer Club, 2200 Briarwood Way, Birmingham, Alabama 35243 Please do not mail cash.

Child's Name \_\_\_\_\_ Parents Names: \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Date of Birth \_\_\_\_\_ Male/Female \_\_\_\_\_ School: \_\_\_\_\_ Church: \_\_\_\_\_

Email #1: \_\_\_\_\_

Email #2: \_\_\_\_\_ Cell Mom \_\_\_\_\_ Cell Dad \_\_\_\_\_

Fall 2023 Team played for: \_\_\_\_\_

[For Registrar's Use Only]: Date Registered \_\_\_\_ Amount Paid \_\_\_\_\_ Check Number \_\_\_\_\_

### **Should the parent or guardian (primary contact) not be available, who should we contact (secondary contact) in case of emergency?**

Name: \_\_\_\_\_ Relation: \_\_\_\_\_ Phone: \_\_\_\_\_

**Consent Statement:** I, the undersigned parent/guardian, do hereby grant permission for my son/ daughter, named above, to attend the Briarwood Soccer Club's Ambassador Holiday soccer camp. In order that my son/daughter may receive the proper medical treatment in the event that he/she may sustain injury or illness during the course of the camp, I hereby authorize the camp staff to obtain or provide medical treatment for my son/daughter for such injury or illness during the camp, and I hereby hold the camp staff and sponsoring organization(s), as well as its representatives, harmless in the exercise of this authority.

I further understand that there is always a possibility that my son/daughter may sustain physical illness or injury while at the camp. If this occurs, I hereby authorize the camp staff and representatives to refer my son/daughter to a medical treatment center (hospital, etc.). I further acknowledge and understand that I will be responsible for any medical bills that may be incurred on behalf of my son/daughter for physical illness or injury that he/she may sustain during the camp. I hereby release Briarwood Presbyterian Church, Briarwood Christian School, and the Camp staff from any and all liability, claims, demands, and causes of action for personal injuries or loss that my son/daughter may sustain during the camp.

### **Minor (Child) Photo Release Form:**

I grant Quest Recreation my permission to use the photographs described as for any legal use, including but not limited to: publicity, copyright purposes, illustration, advertising, and web content. Furthermore, I understand that no royalty, fee, or other compensation shall become payable to me by reason of such use.

- Yes
- No

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent or Guardian