



**Mail Application To:**

Bryan Hayman

302 Brazoswood Dr.

Clute, TX 77531

Phone: 832-863-1524

E-mail:

[Bryan.Hayman@Brazosportisd.org](mailto:Bryan.Hayman@Brazosportisd.org)



“This athletic camp/clinic follows guidelines set forth by Brazosport ISD and the UIL.”

**Please Contact with any question.**

**Bryan Hayman**

**832-863-1524**

**[Bryan.Hayman@Brazosportisd.org](mailto:Bryan.Hayman@Brazosportisd.org)**

**Brazoswood  
Buccaneer Soccer  
Camp**



**Slade Field  
Brazoswood High  
School**

**July 22-24, 2019**

**Camp will be held at...**

**Brazoswood High School Slade Field**

**Kindergarten  
-Incoming  
Freshmen  
Welcome!**



**Sessions include:**

| Grades                | Time        |
|-----------------------|-------------|
| K-5th Grade           | 5:00-7:00pm |
| 6th-Incoming Freshmen | 5:00-8:00pm |

**Prices are as follows:**

| Grades                | Price   |
|-----------------------|---------|
| K-5th Grade           | \$50.00 |
| 6th-Incoming Freshmen | \$60.00 |



Camp will begin promptly at 5:00 the first day at Slade Field located at Brazoswood High School. Please allow time for registration and sign in before .



Players will be grouped by: age and ability.



Water will be available for the campers.



SHIN GUARDS ARE MANDATORY!



Shorts, t-shirt, and soccer cleats are the recommended dress (other optional items include: sunscreen, soccer ball, water jug or sports drink).

*Camp will be a combination*

*Of skill training and fun, competitive play.*



**Camp Director: Bryan Hayman**  
(Brazoswood Head Soccer Coach  
National Education Staff-United  
Soccer Coaches)

Brazoswood HS Soccer Coaching  
Staff

**Camp Staff: Jamie Hutchison**

(Clear Creek Womens Coach  
National License from NSCAA)



**REGISTRATION FORM: Please DETACH this portion and return.**

Mark the age group in which the camper will be at the time of camp.

| Age                  | Time        | Price |
|----------------------|-------------|-------|
| _____ K-5th Grade    | 5:00-7:00pm | \$50  |
| _____ 6-Incoming 9th | 5:00-8:00pm | \$60  |

Camper's Name: \_\_\_\_\_

Camper's Address: \_\_\_\_\_

Guardian's Phone: \_\_\_\_\_

Guardian's Cell: \_\_\_\_\_

Guardian's E-mail: \_\_\_\_\_

Method of Payment:

\_\_\_\_\_ Cash

\_\_\_\_\_ Check (# \_\_\_\_\_)

**(Make checks payable to "Brazoswood High School")**

I, as a parent or guardian, hereby give permission for my child to participate in the Brazoswood High School Soccer Camp and acknowledge the fact that he/she is physically participate in camp activities. I hereby authorize the camp staff to act for me according to their best judgment in any emergency requiring medical attention. I acknowledge that I may be responsible for any cost (through family medical insurance or otherwise) incurred due to sickness or injury to my son/daughter. I hereby waive any claim I might have against the camp, director, or the institutions providing the facilities.

\_\_\_\_\_ Guardian's Printed Name

\_\_\_\_\_ Guardian's Signature

\_\_\_\_\_ Date