

# 2024 Briarwood Ambassador Elite Soccer Camp

# June 10-14, 2024 For Boys and Girls ages 7-14 9:00 am - Noon

**Engel and Westminster Fields** (located at 5080 Cahaba Valley Trace, Birmingham, AL 35242)

### Camp Theme: "Undefeated" Romans 8:37-39

#### Camp Features:

Individualized professional soccer instruction

• Focus on fundamentals and skills

- Quality biblical instruction to learn "Undefeated" Romans 8:37-39
  - Small-sided games for maximum touches on the ball
- Fun drills and exercises to stimulate learning proper technique and team tactics.

Includes advanced training for competitive players.

• Organized scrimmages daily

- Players grouped by age and ability
- \$130 Camp fee includes camp T-shirt, soccer gift, and other prizes

#### Ambassador Camp Staff:

**Ryan Leib**– The camp director, Coach Ryan played professionally for 8 years, is the nationally licensed coaching director for Briarwood Soccer Club and has a passion for developing young soccer players.

Shawn Marlow – Competitive coach at BSC, Alabama ODP staff coach, holds the USSF National Youth license, BSC Brazil mission trip 4 years

Local professional, college and high school players are on staff giving campers a great model of where they can get to in their soccer careers.

Camper to staff ratio is 8:1

#### Daily Schedule:

8:40-9:05 Campers Arrive 9:05-9:15 Introductions, review of previous day 9:15-9:45 Group warmup and fun games 9:45-10:00 Team Time with Coach 10:00-10:30 Skill session I 10:30-10:40 Break, 10:40-11:10 Skill Session II/Tactical session 11:10-11:25 Break/Fun/Devotions "Undefeated" Romans 8:37-39 11:25-11:55 Team Games 11:55-12:00 Wrap-up, dismissal

#### **Players Need:**

• Soccer cleats, indoor shoes or sneakers, extra t-shirt, soccer ball, water bottle, light snack

- We will have water coolers for campers to refill their bottle to stay hydrated.
- Full medical attention will be provided.
- Space is limited to first 100 applicants

#### Location:

**Camp will be held at Briarwood Engel field, the upper field behind OMPC**, located at 5080 Cahaba Valley Trace, Birmingham, AL 35242. From I-65 take 119 north 8 miles, Briarwood Engel Field is on the left past Heardmont Park.



## **APPLICATION FORM**

Detach and send this form and **\$130.00** for the cost of the camp (payable by cash or check made to Ambassadors Soccer Camp). Bring or mail to the Quest Recreation Office at Briarwood Presbyterian Church. Ambassadors Soccer Camp, c/o Briarwood Soccer Club, 2200 Briarwood Way, Birmingham, Alabama 35243 Please do not mail cash. Pay online at <u>https://www.questrecreation.org/briarwood-soccer-camps.html</u>

Child's Name				
Address				
City				-
Age	Date of Birth	//	Male	e/Female
Parent(s) Name(s)		Email:#1		
Parent(s) Name(s)		Email #2		
Primary Phone	Mother Cell		Father Cell	
Should the parent or guardian (p	rimary contact) not be	e available, who	should we contact (second	ndary contact) in case of emergency
Name:		Relation:	Phone:	
Any Health Issues:				
Is your child Special Needs? :				
Team played for Fall 2023 or Sp	ring 2024 season:			
Circle T-shirt size: YS, YM, Y	L, S, M, L, XL			

Waiver:

*I*, the undersigned parent/guardian, do hereby grant permission for my son/ daughter, named above, to attend the Briarwood Soccer Club's Ambassadors 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 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.

 Date
 Signature of Parent or Guardian

 For Registrar's Use Only:
 Date Registered \_\_\_\_\_\_ Amount Paid \$\_\_\_\_\_\_ Check #\_\_\_\_\_\_