



(636) 349-3760

One Soccer Park Road • Fenton, Missouri • 63026

FAX (636) 343-5150

**2008**

# McKendree University Soccer Camps

## Camp #1

## Camp #2

**Who:** Boys & Girls – Ages 5 through 12

**Who:** Boys & Girls – Ages 13 through 18

**Cost:** \$75.00 (includes a camp T-shirt)

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**Where:** McKendree University  
701 College Road • Lebanon, IL 62254

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701 College Road • Lebanon, IL 62254

**When:** Mon, June 23rd through Thur, June 26th  
6:00 p.m. to 8:00 p.m.

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6:00 p.m. to 8:00 p.m.

The St. Louis Soccer Club, recognized as one of the premier youth soccer clubs in the United States, has the richest soccer tradition in the State of Missouri – winning 14 National Championships since 1972. In addition to sponsoring youth select teams in all groups between U-8 and U-19, the St. Louis Soccer Club offers a wide range of programs for boys and girls in the St. Louis Metropolitan Area, including:

- specialized instructions for individuals or groups
- team training sessions & soccer camps
- indoor developmental programs
- coaching clinics

The St. Louis Soccer Club, a non-profit organization, is independent of and not affiliated with any school district. The views, opinions and programs of the St. Louis Soccer Club therefore do not necessarily represent those of any school district.

### Program:

Our advanced soccer training methods include individual technique training, i.e. passing, dribbling, receiving and shooting, plus group tactics using small-sided games. Coach to player ratio is approx. ten to one.

Please complete and mail the application form below with a check to: **St. Louis Soccer Club  
#1 Soccer Park Rd.  
Fenton, MO 63026**

For more info call 636-349-3760 or visit our website – [www.stlouissoccerclub.com](http://www.stlouissoccerclub.com)

### McKendree University Soccer Camps

Circle Desired Program

Camp #1 - June 23-26

Camp #2 - June 23-26

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

Male \_\_\_\_\_ Female \_\_\_\_\_ Birthdate: \_\_\_\_\_ Age \_\_\_\_\_

My child has permission to attend the St. Louis Soccer Club soccer camp. I voluntarily and knowingly agree to release the coaches, staff and players from any liabilities, damages or injuries incurred in any camp activity. I hereby give my permission for my child to be medically treated for injuries or illness during his/her stay at the St. Louis Soccer Club Soccer Camp Program.

\_\_\_\_\_  
(Signature of Parent or Guardian)

Email: [soccer@stlouissoccerclub.com](mailto:soccer@stlouissoccerclub.com) Website: [www.stlouissoccerclub.com](http://www.stlouissoccerclub.com)