



Boys and Girls ages 8 - 14 are eligible to attend

**TUITION RATES:**

**\$135**

Independent Health Members: you can use your "FLEX FIT" allowance toward camp tuition.

**PLEASE NOTE:**

There is a \$40 non-refundable down payment for EACH camper. There will be a \$20 service charge for any returned checks.

**Each Camper's Tuition Includes**

Camp T-shirt,  
Skills Evaluation and Memorable Experiences.

**For additional information please contact:**

**Jeff Panik**

Head Men's Soccer Coach/Co-Camp Director

(716) 926-8796

Fax (716) 649-6429

Email: [jpanik@hilbert.edu](mailto:jpanik@hilbert.edu)

**OR**

**Kelly Starchok**

Head Women's Soccer Coach/Co-Camp Director

(716) 926-8797

Fax (716) 649-6429

Email: [kstarchok@hilbert.edu](mailto:kstarchok@hilbert.edu)

[www.hilberthawks.com](http://www.hilberthawks.com)

**Monday Check-In Schedule**

Registration/Open Field ..... 8:00am-8:45am  
Camp Rules/Attendance ..... 9:00pm-9:15am  
Camp Warm-up/Session #1 ..... 9:15am  
Break ..... 10:20am  
Session #2: Games/Competitions ..... 10:40am  
Cool Down ..... 11:50am  
Camper Pick-up ..... 12:00pm

**"Quick Day Camp Facts"**

Day camp runs from 9am – 12pm

Camp Emphasis on technique and small-sided games to ensure proper soccer development, individual involvement, and fun!

Your son/daughter will play in some form of a competitive soccer game each day and will play at least half of the game.

Our camp staff is made up of high school and college coaches, as well as local collegiate players.

Camp co-directors Kelly Starchok and Jeff Panik have a combined 34 years of camp coaching experience.

No hidden costs.



**2014**

**BOYS & GIRLS  
SOCCER CAMP**

*1st Annual*

**Monday-Thursday**

**August 4th - August 7th**

**9am - 12pm**



## TYPICAL DAY AT CAMP

- 8:30AM-9:00AM: CAMPER DROP-OFF
- 9:00AM-9:15AM: ATTENDANCE,  
CAMP WARM-UP AND  
DYNAMIC STRETCHING
- 9:15AM-10:20PM: SESSION #1  
- TECHNICAL &  
FUNDAMENTAL BALL WORK
- 10:20AM-10:40AM: BREAK/SNACK
- 10:40AM-11:50AM: SESSION #2  
- GAMES, TACTICAL, &  
COMPETITIONS
- 11:50AM-12:00PM: COOL DOWN
- 12:00PM: CAMPER PICK-UP
- Parents are welcome at any time during the week  
to watch and cheer!

All camper drop-off and pick-up will take place at  
the practice soccer field!

CAMP LOCATION:  
Hilbert College, 5200 South Park Ave.  
Hamburg, NY 14075

\*Soccer Field is directly across from  
Hafner Recreation Center  
and parking lot C\*

### IMPORTANT MEDICAL INFORMATION

**Please mail child's immunization record OR  
Fax to: (716) 649-6429**

If your child requires non-prescription or prescription  
medication during the week of camp, please be  
prepared to follow these simple rules:

1. All medication should be given to our Athletic  
Trainer during registration by parent/guardian.
2. All medication is to be in it's original container  
with camper's name, name of medication, the  
dosage and the frequency of administration  
clearly marked.
3. A note from the doctor must accompany the  
medication, stating the name of the camper, name  
of medication, the time it is to be given and the  
reason camper is taking medication.
4. At check-in on Monday, an authorization form will  
be completed by the parent/guardian requesting  
the medicine be administered.

### Camper Info:

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

Age: \_\_\_\_\_ DOB \_\_\_\_\_

T-Shirt Size: (circle size)

**Youth:** M L      **Adult:** S M L XL XXL

Email address \_\_\_\_\_

Number of years child has attended camp \_\_\_\_\_

Years of Soccer Experience: \_\_\_\_\_

Type of Soccer Experience: \_\_\_\_\_

### ALL CAMPERS...

**When your application** and deposit have been  
processed, a confirmation letter with detailed instructions on  
what basic items you should bring to camp will be mailed.

**An Emergency contact/medical information form** will  
also be mailed. To avoid long lines at check-in, it is  
recommended that you mail your completed medical  
information forms in before the start of camp. Expect to  
complete an additional signature page if your child requires  
non-prescribed or prescribed medicine during the camp.

**IMMUNIZATION RECORDS MUST BE UP TO DATE.**  
**We require a copy of your child's immunization dates.**

I give the camp permission to use any camp related photos  
of my child for camp publicity. I understand that the week's  
tuition fee includes the use of all facilities and accident  
insurance. I know of no medical or physical problems  
which may affect my child's ability to safely participate in  
this camp. I am responsible for any medical or any other  
charges in connection with my child's attendance at the  
Hilbert College Hawks Soccer Camp.

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

Administrative use only:	Type of camper: Day
Tuition \$ _____	Tuition \$ _____
Disc \$ _____	Disc \$ _____
Rec'd \$ _____	Rec'd \$ _____
Due \$ _____	Due \$ _____

### Camp Application: Boys & Girls Soccer Camp August 4th - August 7th

Name \_\_\_\_\_ School Grade in Fall \_\_\_\_\_ Age \_\_\_\_\_

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

Home Phone \_\_\_\_\_ Emergency Phone \_\_\_\_\_ Emergency Contact: \_\_\_\_\_

School \_\_\_\_\_ Coach \_\_\_\_\_

I hereby desire that my child, who is under the age of 18, participate in the Soccer Camp offered by Hilbert College and by the execution of this release, I agree that all the requirements, directions, rules and standards of this camp have been fully explained to me and my child. By my signature below, I hereby release Hilbert College and all of the personnel associated with this camp from any and all liability that may arise from my child's participation in the camp.

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

*Please print using ball point pen*

*Please return a copy of your insurance card with application and deposit. Make checks payable to Hilbert College.  
Send application to: Hilbert College, Boys & Girls Soccer Camp, 5200 S. Park Ave., Hamburg, NY 14075*