

CAMP INFORMATION

Registration

Complete the registration & medical release forms and mail to:

P.O. Box 274

Dallas GA, 30132

Cost of Camp:

\$125.00

Payment options:

1. Include a check or money order with registration form.
2. Zelle -
kmhs.soccer.booster@gmail.com
(must put your child's "full name & soccer camp" in memo section)

Location: Camp will be on the all-weather turf field in the stadium at Kennesaw Mountain High School

(1898 Kennesaw Due West Rd. Kennesaw, GA 30152)

CAMP DETAILS

The camp is designed to improve soccer skills and technique through drills, fun activities and scrimmages.

Each participant will be grouped by age and/or ability and will receive specialized training from the Kennesaw Mountain coaching staff

HOURS

Drop off: 8:00-8:15am

Training: 8:15am-11:45am

Wrap up: 11:45am-12:00pm

Pick-up: 12:00-12:15pm

WHAT TO BRING

Each participant should bring:

- Cleats and tennis shoes
- Shinguards
- Water bottle, labeled with name
- Soccer ball, labeled with name
- Sunscreen
- Snacks & sports drinks (small cooler)

TOPICS TO BE COVERED

- Passing and Receiving
- Dribbling
- Finishing
- Defending
- First Touch
- Team Possession

MEET THE COACHES...

Daniel DePlanche— Varsity boys head coach at KMHS Coach DePlanche has been a high school head soccer coach at the varsity level (boys & girls) for 23 years, 19 at KMHS. His teams have reached the playoffs in 19 of his 23 seasons & also won Region Championships in 2003, 2016 & 2017. His team reached the Elite 8 in 2019. The 2023 team finished as region runner-up, finishing with only 1 region loss. Coach DePlanche served as an assistant coach for the 2006 Girls DPL team at SSA in 2021. This team won the South Eastern Conference & qualified to play at Nationals later that summer. He also served on the U8 Player Development Academy staff at SSA. Coach DePlanche played semi-professional soccer in the U.S.I.S.L. for the Montgomery Capitals. He currently holds a USSF D license.

Carlos Barrera— Varsity boys assistant coach & head goalkeeping coach at KMHS. He has held these positions for 12 years. He was formerly the director of goalkeeping at Rush Soccer Club. While living in his homeland of Columbia he played professional soccer for 1st division Deportivo Independiente Medellin. Coach Barrera holds a USSF B license and a FIFA license from the Argentina FA.

Juan Castellanos— Technical Director & Boys DOC at Rush Soccer. He currently coaches both boys & girls at Rush as well as the ODP program. Coach Castellanos played professionally in Columbia and for the Atlanta Silverbacks. This will be his 3rd year at our camp. He currently holds a USSF A license.

Kennesaw Mountain High School Soccer Camp 2023

Boys & Girls
Ages 5-13



11th Annual

June 5th — 8th

Contact
Coach Daniel DePlanche

Email
kmhssoccercamp@gmail.com

Phone
678-758-2259

Website
<https://kmhssoccercamp.weebly.com/>

2023 KMHS Soccer Camp Registration Form

Player Name: _____

Age: _____ Grade in 2023 (entering): _____ Experience Level: _____ Girl/Boy _____

T-shirt Size (circle): YS YM YL AS AM AL AXL How did you hear about us? _____

Parent Name: _____

Parent E-mail Address: _____

Home Address: _____

City: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Emergency Contact: _____ Emergency Phone: _____

Existing Medical Conditions/Allergies: _____

BY SIGNING BELOW I (parent/guardian of above child) AGREE TO THE FOLLOWING POLICIES

By its nature, participation in athletics includes a risk or injury which may range in severity from minor to long term catastrophic injury. It is not possible to eliminate this risk. Participants have the responsibility to help reduce the chance of injury. Participants must obey all safety rules, report all physical problems to coaches or camp supervisors, follow a proper conditioning program and inspect their equipment daily. By signing this permission form, you acknowledge that you have read and understand this warning. Parents/guardians or students who do not wish to accept the risks described in this warning should not sign this permission form. In addition, should I be unavailable at the time of injury, I authorize the Kennesaw Mountain Soccer Camp Staff to take all immediate action needed to eliminate/reduce the risk of injury. The camp staff may perform first aid, CPR, or contact emergency personnel should the need arise.

I agree to fully waive any and all claims of whatever nature, fully and finally, now and forever, for my child/ward, for myself, my estate, my heirs, my administrators, my executors, my assignees, my agents, my successors, and for all members of my family, and to indemnify, release, defend, exonerate, discharge and hold harmless the Kennesaw Mountain Soccer Camp Staff, the KMHS Booster Club, Cobb County School District, their schools, their trustees, officers, Board members, Board of Education, employees, agents, coaches, athletic trainers, physicians, and any other practitioner of the healing arts (an "Indemnified Party") from any and all liability, personal or property damages, claims, causes of action or demands brought against the Cobb County School District or indemnified party arising out of any injuries to my child/ward or to his or her property or losses of any kind which may result from or in connection with his or her participation in any camp activity.

There will be a \$30 fee for any checks returned to KMHS Soccer Camp due to insufficient funds.

My signature below attests that I have read, understand and concur with the information on this form, and that

I give consent for my child to participate in the Kennesaw Mountain High Soccer Camp as stated above.

***Signature of Parent or Guardian**

Signature: _____ Date: _____

Insurance Information

I/We, the undersigned hereby certify that I (we) am (are) the parent or legal guardian of the camper. I hereby give permission for the staff of the camp to seek appropriate medical attention in the event of accident, injury or illness. I will be responsible for all costs of medical attention and treatment.

I/We hereby acknowledge that our child is physically fit and mentally capable of participating in soccer camp activities.

Insurance Co: _____

Policy Holder: _____

Policy # _____

Parent Signature: _____

Date: _____

Special Considerations & Allergies:

Unless you notify us to the contrary we can only assume that each person registering for camp is in good physical condition and free of limiting conditions. Please notify us if there is any factor that might limit a person registering for camp so that we can do our best to provide the appropriate services and attention. You may use an attachment. **We are a peanut/treenut free camp!**

REFUND POLICY

No refunds will be granted for missed days during the camp week. There are no refunds for sessions delayed or missed due to acts of God (i.e. rain, lightning, flooding, tornados, etc.)

Camp is rain or shine