

You are invited to

Join us for 4 Days of Soccer
With - Technical warmups
Fun soccer skill building games
and Soccer Scrimmages

 **There is "NO CHARGE"** 



Mon - Thurs from 9 a.m. - 10:30 a.m.

August 1st-4th

SUN PRAIRIE - CARRIAGE HILLS ESTATES PARK

Perfect ages are 9-11 years old
but older are welcome & younger might want to give it a try too!



Who Is Running The Sessions?

John Von Klopp (JVK)

adidas/NSCAA 2002 Girls Regional Coach of the Year
USSF - "C" Coaching License
NSCAA - Youth National Diploma
USSF - Youth National Coaching License
English FA - Youth Psychology for Soccer
NSCAA - Director of Coaching Diploma
14 Seasons of High School Soccer Experience
Member of Positive Coaching Alliance
Coaching Soccer Since 1992

Anja Von Klopp

NSCAA - Level 1 Coaching Diploma
USSF - Y1 Coaching License
USSF - F Coaching License
200 hours of Coerver Residential Camp player experience
Attended the Coerver Coaching 12 hour coaching course
Starter on SP Varsity Soccer since Freshman year
Plays Regional League level soccer for Rush WI
Played for Chicago/WI Fire in Las Vegas Tour (invitation only to try out)
Two years experience in WI Olympic Development Program soccer
Committed to Viterbo University as a soccer player

Please bring "Every Day"

- A Soccer Ball
- Water
- Shin Guards (Socks worn over them)
- Sun Block
- A Jacket (In case of cold days)
- Wear a white or ash t-shirt or jersey
- Energy!

** A low bounce Sala/Futsal ball will be used during scrimmage time for more touches on the ball and increased safety*

If you have any questions
CONTACT JVK: (608) 770-1818
Email: jvk@soaringsoccer.com



1052 Westridge Dr.
Sun Prairie, WI 53590

RELEASE of LIABILITY for 2016 Camps & Classes:

Please fill out & sign this form. I understand that I waive, release and forever discharge Soaring Soccer Academy, the 2016 Soccer Staff, Sponsors or local city & parks from any liability or property damage that may occur during participation in any Soaring Soccer Academy 2016 soccer event. In the case of emergency, I grant permission for my child or myself to receive medical treatment by or at a local hospital or health clinic. All soccer campers should have their own insurance. This waiver also grants Soaring Soccer permission to respectfully use any camp photo which includes your child or his/her likeness.

Name: _____

M/F _____ Date of Birth _____

Current Club _____

Address: _____

City: _____

Parent Name: _____

Emergency Phone: _____

Emergency
Contact Name: _____

Email: _____

Signing this Registration form states you agree with the RELEASE of LIABILITY for 2016 SSA Camps & Classes:

Signature _____