

M.I.G. SOCCER

2020 Summer Camps at Talley Day Park or New Garden Township Building

CAMP 1: Monday-Friday, June 15th-19th @ Talley Day Park

CAMP 2: Monday-Friday, June 22nd-26th @ Talley Day Park

CAMP 3: Monday-Friday, July 20th-24th @ Talley Day Park

CAMP 4: Monday-Friday, August 3rd-7th @ New Garden Township Building

CAMP 5: Monday-Friday, August 10th-14th @ New Garden Township Building

TIME: 9:00 a.m. - 12:00 Noon

LOCATION:

CAMPS 1 - 3 @ Talley Day Park - 1300 Foulk Rd, Wilmington, DE 19803 (Next to Brandywine Library)

CAMPS 4 & 5 @ New Garden Township Building - 299 Starr Rd, Landenberg, PA 19350

COST: \$135.00 per player per week (\$125.00 if booked by 5/1/20) - Check payable to M.I.G. Soccer

COACH: MIKE KLEINERT

- United States Soccer Federation 'A' Licensed Coach and Coaching Education Instructor
- US Youth Soccer East Regional Staff Coach (Olympic Development Program)
- Former Technical Director for Delaware Youth Soccer Association (DYSA)
- Former professional soccer player, former high school and college soccer coach

ABOUT THE TRAINING:

- IT'S FUN!!! WE PLAY A LOT OF SOCCER!!!
- Focus on skills and ideas within the context of a game to improve the transfer to game performance
- Scoring Goals, Creating Goals, & Preventing Goals - This is how you become an "Impact Player"
- Athletic Development - Agility, Balance, Coordination, & Speed - "The ABC'S of an Athlete"
- Reveal and Develop your Leadership Capacity = Player Engagement (Discover the "Captain" in you)

- **QUESTIONS:** Please contact **Mike Kleinert (302) 383-0776** or mike@migsoccer.com

Remember: Save \$10.00 if you register by May 1st, but this is not a deadline.

Registration is open until camps are full. Please book early.

Thank You and I look forward to training with you!!!

- Mike

M.I.G. Soccer: 2020 Summer Training Camps - Talley Day Park or New Garden Township Building

NAME: _____ AGE: _____

STREET ADDRESS: _____ CITY: _____

STATE: _____ ZIP: _____

PLEASE CIRCLE: (CAMP 1 TDP) - (CAMP 2 TDP) - (CAMP 3 TDP) - (CAMP 4 NGTB) - (CAMP 5 NGTB)

PARENT NAME: _____ CELL PHONE: _____

E-MAIL: _____ HOME PHONE: _____

Registration: Please return completed form with check payable to:

M.I.G. Soccer

P.O. Box 5544

Wilmington, DE 19808

** Parental Release: I hereby release M.I.G. Soccer, the director and instructors from all claims that may arise during these sessions.

Parent/Guardian Signature: _____ Date: _____