

## RELEASE FORM

This agreement must be signed by the participant's parent or legal guardian prior to the student's participation in the **SCC Winter Soccer Camp**. By my signature below, I hereby indicate that:

Participant's Name: \_\_\_\_\_

- 1. Permission to Participate.** I am the parent or legal guardian and authorize my child to participate in the program listed above. I understand that participation is subject to the terms and conditions of this Release of Liability and Assumption of Risks form.
- 2. Assumption of Risk.** I acknowledge I am aware of the hazards and inherent risks connected with my child's participation in the activity including, but not limited to, cuts, abrasions, bruises, strains, concussions or fractures to catastrophic injury, such as permanent paralysis, or even death, which are a part of the normal high risk potential associated with participation in the various physical activities involved with this activity.
- 3. Release of Liability.** In consideration of, and as a part of payment for, the right to participate I have and do hereby assume all the above-mentioned risks and any other risks reasonably arising from my child's participation and will hold Community Colleges of Spokane, its Board of Trustees, its officials, employees, representatives, agents and assigns and the state of Washington, and their successors and assigns harmless from any and all liability, actions, causes of action, debts, claims, demands of every kind and nature whatsoever, which may arise of or in connection with, my child's participation in any of the activities arranged by the Community Colleges of Spokane. The terms hereof shall be binding upon all my heirs, executors, administrators, and for all members of my family.

*I, the undersigned, have read this Release of Liability and Assumption of Risks and understand its terms. I execute it as consideration and part payment for the right to participate in the program with full knowledge that by this document I have waived all legal rights that I would have otherwise been entitled to enforce.*

Parent/Guardian's Signature \_\_\_\_\_ Phone Number \_\_\_\_\_ Date \_\_\_\_\_

Insurance Company \_\_\_\_\_ Policy # \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Phone # \_\_\_\_\_

When the parent cannot be immediately contacted, Community Colleges of Spokane is authorized to contact the following:

Family Physician \_\_\_\_\_ Physician's Phone # \_\_\_\_\_

List Child's Allergies: \_\_\_\_\_

<http://www.ccs.spokane.edu/Forms/Athletics-Forms.aspx>  
CCS 8417 (Rev. 10/12) AG Approved Sept 2012



### PLAYING EXPERIENCE

Seattle Sounders A League/USL 1

### PROFESSIONAL ATHLETE 6 YEARS

- 2005 USL First Division Champions
- 2000 and 2003 USL First Place Pacific Division
- 2002 First in League regular season
- Appeared in two USL finals and 3 western conference finals

### COLLEGE ATHLETE—CALIFORNIA STATE UNIVERSITY FRESNO

- Led team both years in points
- 1998-99 NCAA Tournament Appearance
- 1998-99 Season WAC 1st Team
- 1997-98 Season WAC 2nd Team

### COLLEGE ATHLETE—SPOKANE FALLS COMMUNITY COLLEGE

- 1996-98 NWAACC Champions and NWAACC League MVP

### COLLEGE ATHLETE—BELLEVUE COMMUNITY COLLEGE

- 1994-95 NWAACC Champions and NWAACC All Star Team

### Under 18 U.S. National Pool Player

- 1994 Top 40 Players in the U.S.

### COACHING EXPERIENCE

#### Present Titles

- 2014 Assistant Coach CC Spokane Men
- 2014 Head Coach Spokane Shadow, EPLWA First Team
- Gonzaga Women's Soccer Volunteer Assistant

#### ASSISTANT COACH, WEST VIRGINIA UNIVERSITY

- 2013 Season Mid-Atlantic Conference Semi Final
- 2012 Season Mid-Atlantic Conference Semi Final
- 2011 Season NCAA Tournament Appearance 2nd round
- 2010 Season NCAA Tournament appearance 2nd round

#### ASSISTANT COACH, UNIVERSITY NEVADA LAS VEGAS

- 2005-2010
- 2-16-1 Record 2004-2005 Prior to arrival
- 8-7-4 Record 2009-2010 Season First winning record in twelve years

#### ASSISTANT COACH, BELLEVUE COMMUNITY COLLEGE

- 2002-03 Seasons NWAAC Champions
- 2001-02 Seasons NWAAC Champions

#### GRADUATE ASSISTANT COACH, CALIFORNIA STATE UNIVERSITY FRESNO

#### OTHER COACHING EXPERIENCE

Olympic Development Program ■ Head Coach, West Virginia ODP (1999 Birth Year) ■ Head Coach, Nevada ODP (1994 Birth Year) ■ Assistant Coach, Region IV Team (1994 Birth Year) ■ Head Coach, Nevada ODP (1998 Birth Year) ■ Staff Coach, Region IV Team (1990 Birth Year) ■ Head Coach, Nevada ODP (1989 Birth Year) ■ HEAD COACH, CROSSFIRE PREMIER SOCCER CLUB

Some notable players Chad Brown has been lucky to work with and help in their development process, which are currently playing in the MLS are: Ray Gaddis-IN; Philadelphia Union ■ Lamar Neagle-WA; Seattle Sounders ■ Danny Cruz-AZ; Philadelphia Union ■ Nick Deleon-AZ; D.C. United

### PLAYER TRAINING ENVIRONMENT/EXPECTATIONS

#### **GET BETTER EVERY DAY**

Let the best of today be the worst of tomorrow

#### **FOCUSED**

From start to finish, focus on every aspect

#### **COMPETITIVE**

In every aspect, with yourself or your teammates, be competitive

#### **ENERGY**

Give all you have from start to finish

#### **HARD WORK**

100% effort expected every day

#### **DISCIPLINE**

Do not cut corners

CCS ATHLETIC DEPARTMENT

# 2014-15 SPOKANE SOCCER

## FIRST TOUCH TRAINING

### BOYS & GIRLS AGES 7-13

Sessions 1 & 2  
November-December 2014

Sessions 3 & 4  
January-February 2015



Spokane Sasquatch  
Home of the Bigfoot

# 2014-15 WINTER SOCCER CAMPS AT SCC

## Camp Information

Soccer camps are for boys and girls ages 7-13; all skill levels are welcome. Examples of technical development will be covered and will focus on the player's first touch. A lot of individual ball work combined with small sided games. We are looking to create good habits on and off the ball. Ball mastery is key to a player's success.

## What to Bring

Soccer ball and shin guards. **NO** black-soled shoes. Also, bring a good attitude and a willingness to work hard.

**Days:** Monday & Wednesday

### Session 1: 5:15-6:15 p.m.

November 3, 10, 12, 17, 19  
December 1, 3, 8, 10, 15, 17

### Session 2: 6:30-7:30 p.m.

November 3, 10, 12, 17, 19  
December 1, 3, 8, 10, 15, 17

### Session 3: 5:15-6:15 p.m.

January 5, 7, 12, 14, 21, 26, 28  
February 2, 4, 9, 11, 18, 23, 25

### Session 4: 6:30-7:30 p.m.

January 5, 7, 12, 14, 21, 26, 28  
February 2, 4, 9, 11, 18, 23, 25

## Cost: Sessions 1 & 2

\$110 per player, per session  
Family Discount: Save \$10 per sibling  
Team Discount: Save \$15 (8+ players)

## Sessions 3 & 4

\$130 per player, per session  
Family Discount: Save \$10 per sibling  
Team Discount: Save \$15 (8+ players)

**Soccer Junkie (includes all sessions) \$300**

## Location

Spokane Community College Gymnasium  
Walter S. Johnson Sports Center, Building 5  
1810 N Greene Street ■ MS 2050  
Spokane, WA 99217

## For additional information

Chad Brown, CCS Assistant Men's Soccer Coach  
702 239-8737  
[Chad.Brown@sfcc.spokane.edu](mailto:Chad.Brown@sfcc.spokane.edu)

## Camp Staff

Camp staff will include members from the CCS Soccer coaching staff and team members.

## Registration Procedures

The cost is \$110 per player, per session. Please note if a sibling discount applies. Call for a team discount; all registrations will need to be mailed together. You may pay by check, money order, VISA, MasterCard or cash. **Make checks payable to Bigfoot Booster Club.** All registrations must be accompanied by payment and a signed release form.

## Mail-in or Walk-in Registration

Spokane Falls Athletic Department  
Stadium Building 13; Room 113  
3410 W Fort George Wright Drive  
Spokane, WA 99224-5288

## Phone-in Registration

509 533-3133

## Fax-in Registration

509 533-4102

## Payment Method

Check  Credit Card  Cash  Money Order

Credit Card Number (card info destroyed upon processing)

Expiration Date \_\_\_\_\_

V-Code (3-digit # on back of card) \_\_\_\_\_

Name on Card \_\_\_\_\_

Signature \_\_\_\_\_

## Special Notes for Participants:



## Registration Form

Fill out the attached form and mail along with your check or money order payable to **Bigfoot Booster Club**. Do not send cash. Include the total for one or more camps being attended. Family (1+ siblings) and Team discounts (8+ players) must include all individuals' registration forms grouped together.

## Mail to:

### Chad Brown, Assistant Men's Soccer Coach

SFCC Athletic Department ■ MS 3070  
3410 W Fort George Wright Drive  
Spokane, WA 99224-5288

**Entry fees are only refundable with a doctor's note explaining the injury.**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Day Phone \_\_\_\_\_

Evening Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Parent's Email \_\_\_\_\_

Birth Date \_\_\_\_\_ Age \_\_\_\_\_

High School Graduation Year \_\_\_\_\_

Position \_\_\_\_\_

## Please indicate camp attending:

- |  |       |  |       |
|--|-------|--|-------|
| <input type="checkbox"/> Session 1       | \$110 | <input type="checkbox"/> Session 3       | \$130 |
| <input type="checkbox"/> Family Discount | \$100 | <input type="checkbox"/> Family Discount | \$120 |
| <input type="checkbox"/> Team Discount   | \$95  | <input type="checkbox"/> Team Discount   | \$115 |
| <input type="checkbox"/> Session 2       | \$110 | <input type="checkbox"/> Session 4       | \$130 |
| <input type="checkbox"/> Family Discount | \$100 | <input type="checkbox"/> Family Discount | \$120 |
| <input type="checkbox"/> Team Discount   | \$95  | <input type="checkbox"/> Team Discount   | \$115 |

Soccer Junkie (includes every session) \$300

Check # \_\_\_\_\_  Credit Card  Cash  MO

**Total amount enclosed: \$ \_\_\_\_\_**