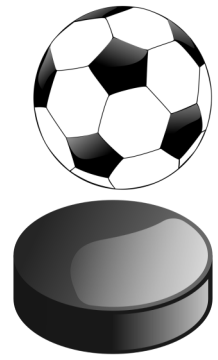


Ivy League Day Camp "Big League" Parent/Child Soccer & Hockey



Boys and Girls Learn Soccer In A Fun, Safe, Age Appropriate Environment with Mom &/or Dad

Classes held on SUNDAYS - BEGINNING December 2nd – January 27th

9:00AM–9:45AM

7 Sessions

2 1/2 , 3 & 4 YEAR OLDS

All classes are held at Ivy League Day Camp

Field House

140 Gordon's Corner Road, Manalapan

732-446-7035

info@ivyleaguedaycamp.com

**LIMITED SPACE
AVAILABLE
Registration
Deadline
December 1st**

\$110 PER PLAYER (*\$10 IVY LEAGUE DAY CAMP/SCHOOL DISCOUNT*)

EACH CHILD WILL RECEIVE A COMPLETION CERTIFICATE

CLASS HIGHLIGHTS:

“Big League” Parent/Child Soccer & Hockey will teach boys and girls the basic Soccer & Hockey skills in a fun and non-competitive environment. **Parents will be actively participating** with their child; passing and shooting the puck for hockey , and learning to hit, catch, and throw for t-ball. The goal of this program is to expose your child to hockey and t-ball and have **parents actively participate** in the teaching and learning process. Classes will be led by Ivy League Day Camp’s athletic specialist, John Silva. John has many years facilitating and creating recreational program for a variety of sports, art, and music. The past 7 years John continues to develop youth on fields of Manalapan, personal training with patience to beginners. We look forward to creating quality memories for you and your child.

*** Applies to 2018-19 Ivy League Day Camp/School Children**

Complete and return with full payment by check to : Ivy League Day Camp, 140 Gordon’s Corner Road, Manalapan, NJ 07726

Child’s Name: _____ Age: _____ DOB: _____ Sex: _____

Address: _____ Town: _____ Zip: _____

Phone #: _____ Cell Phone # : _____ Email: _____

I recognize that there is a possibility of physical injury associated with hockey and t-ball I hereby release, discharge and/or otherwise indemnify Ivy League Day Camp against any claim by or on behalf of the registrant’s participation in the program. I recognize that he/she must be in good health to participate in this program. I further acknowledge that I have read and accept these conditions under which my child’s registration is made. Once program begins there will be no refunds.

Parent Signature: _____ **Date:** _____