

2022 BOYS SOCCER SUMMER CONDITIONING PROGRAM

Originating in the summer of 2004, this program has become an integral part in the success of the Melrose High School Boys' Soccer Program. As a result, our players have become better-conditioned, have avoided injuries, and have become more competitive in the very strong Middlesex League.

COST IS \$100 PER PLAYER – Flat Fee/No Prorating
(Checks payable to: MHS Boys Soccer Boosters)

Days: Monday and Wednesday

Where: Fred Green Field

Start Time: 6:00 AM

End Time: 8:00 AM

Start Date: Monday, July 4

End Date: Wednesday, August 10

BE ON TIME RAIN OR SHINE

NOTE: THE WORKOUT WILL BE CANCELED IN THE EVENT OF THUNDER/LIGHTNING

Please bring the *completed form below*, along with *payment* to the Meet the Coaches Night on 5/16.

Each participant is required to bring:

running shoes soccer cleats shin guards soccer ball water

MANDATORY PARTICIPATION GUIDELINES

- NO BATHROOMS AVAILABLE
- DO NOT ARRIVE MORE THAN 15 MINUTES PRIOR TO THE START OF THE PROGRAM
- DO NOT ATTEND IF YOU ARE FEELING UNWELL
- DO NOT ATTEND IF YOU HAVE BEEN EXPOSED TO ANYONE TESTING POSITIVE FOR COVID-19

*****DETACH HERE*****

Athlete's Name (Registrant): _____

Address: _____

Home Phone: _____ Cell: _____

I, the parent/guardian of

_____, the Registrant,
recognizing the possibility of physical injury associated with the conditioning program, hereby
release, discharge, and otherwise indemnify the Melrose Boys' Soccer Boosters, its agents,
servants and employees against any claim by, or on behalf of, the Registrant as a result of his
participation in the program.

I hereby acknowledge that this waiver covers the risk inherent to parents, players or other
family members of contracting Covid-19 by attending this conditioning program.

I hereby give my consent for emergency medical care prescribed by a duly licensed Doctor of
Medicine or Doctor of Dentistry. This care may be given under whatever conditions are
medically necessary to preserve the life, limb, or well-being of my dependent. This permission
or consent is conditional upon the understanding that in the event of serious injury or illness,
or the need of surgery, all reasonable efforts will be made to contact me. Failure in such effort,
however, should not prevent rendering the necessary emergency treatment.

Participants who do not follow the required safety rules will be barred from participation and
not provided a refund. Under no circumstances should anyone attend training who is
experiencing symptoms consistent with Covid-19, including fever, cough, shortness of breath
or loss of taste and smell.

Parent Name (PRINT): _____

Parent Name (SIGNATURE): _____

Date: _____ Cell: _____