



## The Elite Striker Academy



**Philosophy:** The Elite Striker Academy is a great opportunity for players to improve their technique, offensive skills in the attacking third, passing, dribbling, shooting, and scoring from crosses, volleys, headers and combination plays. **This camp is in conjunction with the Goalkeeper Academy.** The strikers and goalkeepers will train separately for the first hour then we bring them together for the final hour.

**Staff: Camp Director:** Sean Brennan, Assistant/ Goalkeeper Coach for University of North Carolina at Pembroke, Former Starting Goalkeeper for Methodist University

**Camp Director:** Jerry Riggs – North Carolina Olympic Development State Staff Coach and former Mount Olive College Men’s Soccer Coach and local high school coaches and players and college players.

**Dates:** July 30<sup>th</sup>, July 31<sup>st</sup>, August 1<sup>st</sup> **Time:** 6:00pm-8:00pm **Cost:** \$65.00 **Ages:** 10 – 18

**Location:** Rotary Park, 2200 Mayberry Loop Rd., Morehead City NC 28557

Please direct any questions to Sean Brennan at 804-615-1218 or at [sean.brennan@uncp.edu](mailto:sean.brennan@uncp.edu) or Jerry Riggs at 252-726-5083 Ext 2 or at [jriggs@biztec.rr.com](mailto:jriggs@biztec.rr.com)

**Please make checks payable to: Sean Brennan.**

**Mail to:** MCPRD, 706 Arendell St, Morehead City, NC 28557 or **Submit to:** MCPRD office at 1600 Fisher Street.

### Player Registration

**Player’s Name:** \_\_\_\_\_ **Age:** \_\_\_\_\_ **DOB:** \_\_\_\_\_ **Gender:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

**City/State/Zip:** \_\_\_\_\_ **Email:** \_\_\_\_\_

### Release of Liability and Indemnity Agreement

I do hereby and forever discharge, and will save harmless from and indemnify, Morehead City, its elected and appointed officials, the Morehead City Parks and Recreation Department, and all the staff, participants, instructors, and administrators of the Morehead City Parks and Recreation Department, from any and all actions, claims, and demands for or by reason of any damage, loss or injury which hereafter may be sustained by me or my child in consequence of participation by said person in this program.

I hereby acknowledge and admit that the Morehead City Parks and Recreation Department shall not be required to carry any insurance protection for the participants and thereby do agree to provide individual insurance coverage for myself and child.

I have read and understand this Release of Liability, and acknowledge that I have had time and opportunity to do so and to consult anyone of my choice.

Permission is hereby granted for my child \_\_\_\_\_ to participate in the Morehead City Parks and Recreation Department’s program.

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date