

REGISTER NOW

Bloomfield SOCCER ID CAMP



JON ALIAGA
BLOOMFIELD HS GIRLS VARSITY SOCCER COACH

MIKE AIELLO
BLOOMFIELD HS BOYS VARSITY SOCCER COACH

FOR GIRLS AND BOYS GRADES 7-8

GIRLS - JANUARY 5TH | 9:30AM-12:30PM

BOYS - JANUARY 12TH | 9:30AM-12:30PM

BLOOMFIELD HIGH SCHOOL, BLOOMFIELD, NJ

✉ e-mail: bengalsoccercamp@gmail.com



BLOOMFIELD SOCCER ID CAMP REGISTRATION

Name: _____
Address: _____
Town: _____ State: _____ Zip: _____
Home Phone: _____ Cell Phone: _____
E-mail: _____
Age: _____ Grade: _____

Emergency Contact (other than parent/guardian):
Name: _____ Phone: _____
Health Insurance Company: _____
Policy #: _____
Physician Name: _____ Phone: _____
Allergies/Medical Condition(s): _____

\$20 PER PERSON

PLEASE MAKE CHECKS PAYABLE TO:

BENGALS SOCCER CAMP, LLC

P.O. BOX 2341 | BLOOMFIELD, NJ 07003

I hereby authorize the agents of Bengals Soccer Camp, LLC to act for me according to his/her best judgement in any emergency requiring medical attention. I hereby release and discharge the Bloomfield Public Schools, camp staff, affiliated entities and their officers, agents, employees from and against any and all liability or causes of actions arising out of or in connection with my or my child's participation in the camp.

SIGNATURE OF PARENT/GUARDIAN _____

DATE _____