

TOWN OF NEW CASTLE/TOUCHMASTERS/CYSC
SUMMER CAMP 2009



Desmond Morris fondly referred to as The Touchmaster in conjunction with the Town of New Castle Recreation and Parks Commission and Chappaqua Youth Soccer Club will be conducting a one week soccer camp specifically geared to teaching the basics of the game. "Touch" as he is widely known has been coaching along with his brothers and staff in Chappaqua for over 16 years. Desmond has personally "Touched" an innumerable number of local Chappaqua soccer players, including many of the boys and girls currently playing on the Horace Greeley High School soccer teams. Most of the Chappaqua soccer players that have played D1 or D2 soccer have been trained by Desmond. He has also coached teams that have won State Cup Championship, one Super Y league championship and three WYSL League Championships.

Desmond's unique coaching style combines moves, feints, turns rotations from simple to complex these are the fundamental skills that all young players need in order to excel. Desmond is an A licensed USSF coach who has played at every level of soccer including Collegiate, Professional and World Cup Third Round Qualifiers vs Mexico, Honduras and Costa Rica.

Location: Seven Bridges Middle School - Upper Field

Dates: July 13-17, rain date July 20

Ages: Boys and Girls 9-14

Times: 8.30 AM -12.30 PM

Cost: \$200

Bring water and/or Gatorate.

Contact Information:

Telephone: 1-203-496-9904

Email: jozydesy@optonline.net

Registration: New Castle Recreation and Parks Dept located at New Castle Town Hall, 200 S. Greeley Ave. Chappaqua, New York 10514. All checks should be payable to the Touchmasters/Morris Soccer Inc.

Name: _____ Gender : M F

Age _____ Date of Birth: _____

Phone: _____

Address: _____ City: _____

State: _____ Zip: _____

In consideration of your accepting this entry, I, the undersigned, intending to be legally bound, hereby, for myself, my heirs, executors, and administrators, waive and release any and all rights and claims for damages I may have against the Town of New Castle, the New Castle Recreation & Parks Department and any and all sponsors and their representatives, successors, and assignees for any and all injuries suffered by me in said event. I attest that I will participate in this event as a foot race entrant, that I am physically fit and have sufficiently trained for the completion of this event and a licensed medical doctor has verified my physical condition. Further, I hereby grant full permission to any and all the foregoing to use any photographs, videotapes, motion pictures, recordings or any other record of the event for any legitimate purpose.

Parents Signature _____ Date: _____