



BALTIMORE BLAST 2025 SUMMER CAMP REGISTRATION



DATE	TIME	LOCATION	PRICE
June 16-20	9am-3pm	Northeast Regional Rec Center (Indoor)	\$395
June 16-20	9am-12pm	Cedar Lane Park (Harford County)	\$295
June 16-20	9am-12pm	Sparrows Point High School ***	-
June 23-27	9am-12pm	Southeast Regional rec Center	\$295
June 23-27	9am-12pm	Meadowood Park (Girls only camp-Age 6-18)	\$295
June 23-27	9am-12pm	Western Regional Park (Howard County)***	-
July 7-11	9AM-12pm	Rockburn Park (Howard County)***	-
July 7-11	9aqm-12pm	Honeygo Park	\$295
July 7-11	9am-12pm	Latrobe Park	\$295
July 14-18	9am-12pm	Carroll Indoor Sports (Carroll County)	\$295
July 14-18	9am-3pm	Northeast regional rec Center (Indoor)	\$395
July 14-18	9am-12pm	Cedar Lane Park (Harford County)	\$295
July 14-18	9am-12pm	Monsignor Slade School	\$295
July 21-25	9am-12pm	Meadowood Park	\$295
July 21-25	9am-12pm	Eastern Regional Park	\$295
July 28-Aug 1	9am-12pm	Halethorpe Community Center	\$295
July 28-Aug 1	9am-3pm	Southeast regional Rec Center	\$395
Aug 4-8	9am-12pm	Cedar Lane Park (Howard County)***	-
Aug 11-15	9am-12pm	CCBC Dundalk (Girls Only Camp)	\$295
Aug 11-15	9am-12pm	Cedar Lane Park (Harford County)	\$295
Aug 18-22	9am-3pm	Northeast Regional Rec Center	\$395
Aug 18-22	9am-12pm	Reisterstown Regional Park	\$295
Aug 18-22	9am-12pm	Blandair Park (Howard County)***	-

***SIGN UP directly through the Rec council.

All Baltimore County Camp locations are subject to county approval.

Camp attire: Each camper will need to wear a white t-shirt and Black shorts each day to camp.

Parent Name: _____ Camper Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone #: Home: _____ Work: _____ Cell: _____

M/F: _____ Age: _____ Email Address: _____

Camp Location / Dates : _____

T-Shirt Size (Circle): Youth-S Youth-M Youth-L Adult-S Adult M Adult L Adult XL

Extra T-Shirt (\$15) Size: _____ Extra Soccer Ball (\$20): _____

I, _____ (Parent Name) do hereby for myself, my heirs, and assigns, waive and release any and all claims to damage against the Baltimore Blast and any camp locations and its assigns or authorized representatives conducting camp as a result of any or all injuries incurred by _____ (Camper Name) traveling to or from, or while participating in the camp.

Please send this form and **nonrefundable** full payment to:

Baltimore Blast Summer Soccer Camps, 7004 Golden Ring Road, Rosedale, MD 21237

Amount Paid: \$ _____ (Circle): Check- payable to Baltimore Blast Visa/Mastercard American Express Discover

Card Number: _____ Exp. Date: _____

Signature: _____

Payment Plan: Yes _____ No _____ (Must be paid in full 2 weeks prior to camp start)