2017 Oakland Girls Soccer Camp Application

Name:					
Address:					
City:		State:		Zip:	
Home Phone:		Work Pl	Work Phone:		
Email (Require	ed):				
Age:	Grade: (At time of camp)	(Fall 2017)	te:		
		(Fall 2017)			
-	Camps – Girls (ages 5-12)		¢.	175.00	
Dates:	□ June 26-June 30, 2017		ې ډ	175.00	
	□ July 10-14, 2017 amps – Girls (ages 5-12)				
•	□ June 26-June 30, 2017		ć,	295.00	
Dates.	□ July 10-14, 2017		ې. بې	295.00	
Roomma Dates: Cost: Choose: Choose:	□ Field Player □ Goalkeeper □ Small □ Medium □ Large □ TAP Assessment: \$25 (option)	\$330.00 Extra Large Dnal)			
Freshmen) Roomma	sident Elite Recruiting Camp for te Request:] July 16-18, 2017 Resident: \$330.00 Field Player] Goalkeeper Small] Medium] Large TAP Assessment: \$25 (optional In-Depth Sports Psych Sess	□ Commuter: \$310.00 □ Extra Large onal)	0		
ALL REGISTR	ATIONS MUST BE PAID IN FULL,	NO PARTIAL PAYMENT	S ACCEPTED		

I wish to enroll in the 2017 Plus One Soccer Camps at Oakland University, Rochester, Michigan. Neither Plus One Soccer Camps, the directors, Oakland University, nor anyone else connected with the camp assumes any responsibility for accidents (medical or dental) or any other injuries incurred as a result of attendance at this camp. The parent/guardian authorized the directors and staff of the soccer camp to act in their best judgment in any emergency requiring medical attention. The parent/guardian will furnish medical insurance for their child.

Parent/Guardian Signature:____

Make check payable to: **Plus One Soccer Camps LLC** Send application and check or money order to: Oakland Women's Soccer Camps Oakland University, Athletics Center 569 Pioneer Drive Rochester, MI 48309-4482

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