

2010 Oakland Girls Soccer Camp Registration Form

Name _____

Address _____

City _____

State _____ Zipcode _____

Telephone _____

Email _____

Birthdate _____ Age at time of camp _____

Roommate request _____

Please register me for:

- July 11-15 Resident Camp
- July 11-15 Goalkeeper Camp
- July 25-29 Resident Camp
- July 25-29 Goalkeeper Camp

I wish to enroll in the 2010 Oakland Girls Soccer Camps, Oakland University, Rochester, Michigan. Oakland Girls 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 authorizes 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: Oakland Girls Soccer Camps LLC

Mail To:
Oakland Girls Soccer Camps L.L.C.
36 Arizona Avenue
Rochester Hills, MI 48309