

# 2012 Oakland Soccer Camp Application

Name: \_\_\_\_\_  Boy  Girl  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
 Email (Required): \_\_\_\_\_

All confirmations will be sent via email only

Age: \_\_\_\_\_ Grade: \_\_\_\_\_ Birthdate: \_\_\_\_\_  
(at time of camp) (Fall 2012)

Half-Day Camps – Boys/Girls (ages 6-13) \$150.00  
 Dates:  June 25-29, 2012  
 July 16-20, 2012

Full-Day Camps – Boys/Girls (ages 6-13) \$285.00  
 Dates:  June 25-29, 2012  
 July 16-20, 2012

Junior Elite Resident Camps for Field Players and Goalkeepers – Boys (ages 10-14)  
 Roommate Request: \_\_\_\_\_ (list one; resident campers only)  
 Dates:  July 8-12, 2012  
 Cost:  Resident \$540.00  
 Commuter \$480.00 (includes Lunch and Dinner)

**Choose:**  Field Player  Goalkeeper

Senior Resident Elite Recruiting Camp for Field Players and Goalkeepers – Boys (10<sup>th</sup> Grade – College Freshmen)  
 Roommate Request: \_\_\_\_\_ (list one; resident campers only)  
 Dates:  July 20-22, 2012  
 Cost:  Resident \$275.00  
 Commuter \$245.00 (includes Lunch and Dinner)

**Choose:**  Field Player  Goalkeeper

**\*Group Discounts for groups of 4 or more. Here's what to do to qualify:**

1. Print out the applications for the camp ( <b>do not register online</b> )	Jr. Elite Resident Camp	<del>\$540.00</del> Now \$520.00
2. Send applications ( <b>there must be a minimum of 4</b> ) in the same envelope to the address on the applications	Jr. Elite Resident Camp (Commuters)	<del>\$480.00</del> Now \$460.00
3. Include checks for the discounted amount with the applications	Full Day Camp	<del>\$285.00</del> Now \$270.00
	Half Day Camp	<del>\$150.00</del> Now \$140.00

**ALL REGISTRATIONS MUST BE PAID IN FULL, NO PARTIAL PAYMENTS ACCEPTED**

I wish to enroll in the 2012 Oakland Soccer Camps, Oakland University, Rochester, Michigan. Neither Oakland 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: **Oakland Soccer Camps LLC**  
 Send application and check or money order to:  
 Oakland Soccer Camps L.L.C  
 PO Box 80884,  
 Rochester, MI 48308-0884