

DAYTON

2018 FLYERS SOCCER ACADEMY CAMP APPLICATION

Name: _____

Address: _____

City: _____ State/Province: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Email (required): _____

All confirmations will be sent via email only

Age: _____ Date of Birth: _____ Grade: _____ Grad Year: _____

At time of camp

- | | | | | | |
|--------------------------|--|----------------------|--------|--------------|-------------|
| <input type="checkbox"/> | April 29 Futures ID Camp | Girls (6 – 8 Grade) | | | |
| <input type="checkbox"/> | April 29 Elite ID Camp | Girls (9 – 12 Grade) | | | |
| | Circle One: (shirt) | Small | Medium | Large | Extra large |
| <input type="checkbox"/> | May 12 Futures ID Camp | Girls (6 – 8 Grade) | | | |
| <input type="checkbox"/> | May 12 Elite ID Camp | Girls (9 – 12 Grade) | | | |
| | Circle One: (shirt) | Small | Medium | Large | Extra large |
| <input type="checkbox"/> | June 9 & 10 Futures ID Camp | Girls (6 – 8 Grade) | | | |
| <input type="checkbox"/> | June 9 & 10 Elite ID Camp | Girls (9 – 12 Grade) | | | |
| | Circle One: (shirt) | Small | Medium | Large | Extra large |
| <input type="checkbox"/> | July 20 – 22 GK/Striker Camp – Boys and Girls (9 th grade - College Freshmen) | | | | |
| | Circle One: | Resident | | Commuter | |
| | Circle One: | Goalkeeper | | Field Player | |
| | Circle One: (shirt) | Small | Medium | Large | Extra large |

***All University of Dayton camps and clinics are open to all entrants, and are only limited by the number, age, grade level, or gender described**

I wish to enroll in the 2018 Flyers Soccer Academy Camps held by Golz Training Academy LLC, in Dayton, OH. Neither Flyers Soccer Academy Soccer Camps, Golz Training Academy LLC, the directors, University of Dayton, or 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 any of the camps. The parent/guardian authorized the directors and staff of the Flyers Soccer Academy Camps to act in their best judgement in any emergency requiring medical attention. The parent/guardian will furnish medical insurance for their child.

Parent/Guardian Signature: _____

Make check payable to: Golz Training Academy LLC

Send Application and check/money order to:

Golz Training Academy

300 College Park

Dayton, OH 45469 - 1220