

COERVER CRUSH CAMP – Application

Camp: June 20-24 2010 (10-13's) _____ June 27-July 1 (14-18's) _____

Name of Player _____ Age _____ M/F _____

Address _____

City _____ State _____ Zip Code _____

Name of Mother _____ Name of Father _____

Home Phone _____

Mother Cell _____ Father Cell _____

Mother E-Mail _____ Father E-Mail _____

Other Emergency Contact _____ Number _____

Relationship _____

Club Affiliation _____

Position _____ Playing as a Goalie at this camp? Y/N _____

T- Shirt Size YM ___ YL ___ AS ___ AM ___

Roommate Request (one only) _____

If this player is coming as part of a team, which team? _____

Medical Insurance Company _____ Policy # _____

Doctor _____ Doctor's # _____

Do want to purchase the unique Adidas Coerver Soccer Ball for \$35? 5 _____ 4 _____

All Players Receive the unique Coerver T- Shirt. Extra T-shirt for \$15? Y ___ N ___

Camp Registration: \$490 (or \$460) if received by March 31st

Or Deposit \$220 Balance to be paid by June 1st

Camp Ball: \$35

Extra T-shirt \$15

Total _____

Checks to: "ESP". Send Complete Application to: 5126 Roberts Place, Edina, MN 55436