



East Coast Field Hockey

APPLICATION FORM EAST COAST FIELD HOCKEY 2012

Name _____ Age _____ M F

Address _____

City _____ State ____ Zip _____

Phone _____ DOB _____

School _____ Grade _____

Position _____ Jersey Size: S – M – L - XL

Health Insurance Provider _____

Policy # _____

E-Mail Address _____

Currently in Futures: Yes/No

Desire Recruiting Video: Yes/No \$225 /each “All Camps are Fully US Sanctioned Partner Camps”

PROGRAM TUITION

Mendoza High Performance Course	July 7 - 15	\$980.00
National GK 1 Elite Academy	July 8 - 13	\$515.00
National Elite Academy	July 8 – 13	\$515.00
Junior Academy	July 15 - 19	\$375.00
National Academy	July 15 – 19	\$475.00
National GK Academy 2	July 15 - 19	\$485.00
National Striker Academy	July 15 - 19	\$475.00
High School Team Camp 1, East <i>CollegeAmbitions.com</i>	July 22 - 26	\$475.00
High School Team Camp 1, West - Ohio	July 22 – 26	\$475.00
High School Team Camp 2 <i>CollegeAmbitions.com</i>	July 29 – Aug 2	\$475.00
High School Team, “SUPER CAMP” <i>CollegeAmbitions.com</i>	July 29 – Aug 2	\$525.00
High School Team Camp 3	Aug 5 - 9	\$475.00
High School Team Camp 4	Aug 12 - 16	\$475.00
Non-residential Summer Camps at your school	July 1 – Aug 24	\$150.00



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\$175 Deposit Required

All payments are non-refundable

All training camp payments **MUST** be received prior to 1st of June 2012

No Cancellation accepted after 1st of May 2012

For Paypal payments, the processing fee is 3%

All the summer camps are held in Susquehanna University, PA, except High School Team Camp 1 West which is held in Walsh University, OH, and High School Team Camp 3 and 4 in Estella, PA.

For more information about our summer camps and CollegeAmbitions.com, visit our website www.eastcoastfieldhockey.com.

The undersigned, a parent or legal guardian of this player, understands and accepts that the risk of injury is possible while playing field hockey.

I authorize the directors to act for me according to their best judgment in any emergency requiring medical attention. I authorize medical treatment as required.

(Parent or guardian signature Required)

PLEASE PRINT ALL INFORMATION VERY CLEARLY

Make checks payable to:

East Coast Field Hockey: Send to: P.O. Box 172, Hershey, PA 17033

Congratulations on Accepting the Challenge

For official use only:

Check No.

Amt:

Confirmation Date: