

# 2010 Auburn Soccer Camp Application- Day Camp

Name: \_\_\_\_\_  
Last First

Address: \_\_\_\_\_

City: \_\_\_\_\_ St.: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_

E-Mail: \_\_\_\_\_ \* MUST PROVIDE

Age at Camp: \_\_\_\_\_ Grade for Fall 2010 \_\_\_\_\_

T-Shirt Size: YM  YL  S  M  L  XL

Check one:  Female  Male

Check one:  Field Player  Goalkeeper

Have you attended an Auburn Soccer Camp before? Yes  No

If so, how many years? \_\_\_\_\_

Day Camp- June 7-10, 2010 \$ 150.00

**Check One: Auburn Soccer Ball: \$25**

Size 5  No Ball  
 Size 4

Each camper must have a completed medical form and a copy of the front and back of their insurance card before they will be allowed to participate. The medical form can be found on our website. The AU medical staff will NOT allow campers to participate until we have this form on file. You may mail your medical forms along with your application or you may email them to [soccer@auburn.edu](mailto:soccer@auburn.edu) or fax it to 334-844-4255.

Please send full payment \$ 150.00 with application.  
Be sure to include additional \$ 25.00 if ordering a ball  
Make checks payable to and mail application to:  
Auburn Soccer Camp  
P.O. Box 351  
Auburn, AL 36831-0351

**For Office Use Only:**

Received: \_\_\_\_\_ Ck#: \_\_\_\_\_

Balance: \_\_\_\_\_