

## **Butler Soccer Camps** – Registration Form

Name (Last) \_\_\_\_\_ (First) \_\_\_\_\_

DOB \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_ T-Shirt Size \_\_\_\_\_

(Circle One)      **ELITE**      **FULL-DAY**      **HALF-DAY**

Address \_\_\_\_\_

\_\_\_\_\_

Parent's Names \_\_\_\_\_

Phone # \_\_\_\_\_ 2<sup>nd</sup> Phone # \_\_\_\_\_

Email \_\_\_\_\_ 2<sup>nd</sup> Email \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_

Emergency Contact #'s \_\_\_\_\_ or \_\_\_\_\_

Physician's Name \_\_\_\_\_ Physician Phone # \_\_\_\_\_

Insurance Provider \_\_\_\_\_ Policy ID \_\_\_\_\_

Special Medical Concerns/Issues

\_\_\_\_\_  
\_\_\_\_\_

Special Requests

\_\_\_\_\_  
\_\_\_\_\_

**(Striker Defender Camp Only)**    Circle One Position:    **Striker**    **Defender**    **Goalkeeper**

**(Prep Camp Use Only)**

Graduation Year \_\_\_\_\_ GPA \_\_\_\_\_ SAT \_\_\_\_\_ ACT \_\_\_\_\_

Primary Position \_\_\_\_\_ Secondary Position \_\_\_\_\_

High School \_\_\_\_\_ Club Team \_\_\_\_\_

**\*\*\* PLEASE MAKE ALL CHECKS PAYABLE TO "PAUL SNAPE SOCCER CAMPS" \*\*\***