

WCSC Pembroke Youth Soccer: July 7-11, 2008

Directions: Fill out, cut out, and mail with check. Please print neatly.

Camp: _____ Day (Grades 1-6) _____ Evening (Grades 7-9)

Entering Grade: _____ **Gender:** _____ Male _____ Female

Name _____

E-mail _____

Address _____

City _____ **State** _____ **Zip** _____

Home Phone _____

Parent's Cell _____

I certify that the applicant is in good physical condition. I have listed below any limitations. I authorize WCSC to act for me in an emergency medical situation. WCSC, the director and staff are not responsible for accidents resulting in medical, dental and other expenses.

Parent's signature _____

Insurance carrier _____

Limitations _____

- ▶ **Tuition:** \$195 (day camp), \$135 (evening)
- ▶ **Make check payable to:** *Dean Schneider*
(take \$25 off for 2nd family member, \$50 off for 3rd family member)
- ▶ **Mail check & application to:**
Dean Schneider 49 Technology Drive, #40 Bedford, NH 03110
- ▶ **Tuition & application are due no later than JUNE 21, 2008.**
- ▶ **Circle t-shirt size: Youth: S M L Adult: S M L XL**

