

**GFS Elite Soccer Camps**

Name: \_\_\_\_\_ Grade: (Circle) 6 7 8 FR. SO. JR. SR.

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

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

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone #: \_\_\_\_\_

T-Shirt Size (Girls Sizes) S M L XL

**Camp Options: (Early Bird Discount ends June 1, 2015)**

- College Prep Camp Residential (July 26 - July 28 ; \$425.00) Early Bird \$375.00
- College Prep Camp Commuter \$350 Early Bird \$300.00
- Junior Prep Camp Residential (July 29 - July 31 ; \$425.00) Early Bird \$375.00
- Junior Prep Camp Commuter \$350 Early Bird \$300.00

Roommate Request (Up to 2) \_\_\_\_\_

**Extra Options:**

- Additional T-Shirts \$10 Size: S M L XL
- Guiding Future Stars College Recruiting Playbook \$20

**Please make your \$425 Check payable to GFS**

Attn: GFS Elite Soccer  
27 Provincial Parkway  
Emmitsburg, MD 21727

Email Chris Stack @ [stack@guidingfuturestars.com](mailto:stack@guidingfuturestars.com) for any questions regarding the camp

**Health Insurance Company:** \_\_\_\_\_

**Health Insurance Co. Number:** \_\_\_\_\_

I hereby authorize the staff of GFS Elite Marketing to act for me according to their best judgement in any emergency requiring medical attention, and I hereby release the camp and Mount St. Mary's University from any and all liability for any physical injuries or illness that may occur to the above named camper. I have no knowledge of any physical impairment that would be affected by the above named camper's participation in the camp program outlined in the brochure. My signature on this waiver also states that the above named camper is covered by my personal medical insurance policy

**FOR OFFICE USE ONLY**

<b>DATE RECEIVED</b>	_____	<b>AMOUNT RECEIVED</b>	_____	<b>CASH</b>	<b>CHECK</b>	<b>CREDIT</b>
<b>BALANCE</b>	_____	<b>NEXT SCHEDULED PAYMENT</b>	_____			

