

**APPLICATION FOR ENROLLMENT  
JOHN DALY'S GIRLS' SOCCER CAMP**

**RETURN TO:**            **John Daly**  
                                 **Box 399**  
                                 **Williamsburg, VA 23187-0399**

June 25-29            Resident (\$515)\_\_\_\_    Commuter (\$315)\_\_\_\_  
July 16-20            Resident (\$515)\_\_\_\_    Commuter (\$315)\_\_\_\_  
July 23-27            Resident (\$515)\_\_\_\_    Commuter (\$315)\_\_\_\_

Nike Soccer Ball (\$30)    Size 4 \_\_\_\_\_    Size 5 \_\_\_\_\_

Applicant's Name \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (H) \_\_\_\_\_ (Alternate) \_\_\_\_\_

Date and Year of Birth \_\_\_\_\_

Parent's Email Address \_\_\_\_\_

Club/School Team Name \_\_\_\_\_

Preferred Roommated \_\_\_\_\_  
(2 weeks prior to camp)

**If you wish to train as a goalkeeper check here:** \_\_\_\_\_

A \$100 check payable to John Daly's Girl's Soccer Camp must be enclosed to ensure enrollment in any of the camp sessions. Full payment must be received two weeks before camp begins. This fee is non-refundable, but may be returned in whole or in part, if for unusual circumstances, the applicant must withdraw.

I agree to assume complete financial responsibility for an personal injury or property damage created as a result of an intentional or negligent act of my child or ward while she is enrolled in John Daly's Soccer Camp and while participating in any activities of the same.

Signed \_\_\_\_\_  
(Parent or Guardian)

\*\*Online registration can be found on our website. The service is provided by The Active Network and they will charge a FEE. Please visit our site for more Information.

[www.johndalysoccercamp.com](http://www.johndalysoccercamp.com)

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**For Office Use Only**

Amt. Pd. \_\_\_\_\_ Date \_\_\_\_\_  
Amt. Pd. \_\_\_\_\_ Date \_\_\_\_\_  
Pd. In Full \_\_\_\_\_ Date \_\_\_\_\_