

**COERVER® COACHING**  
**P. O. Box 575**  
**Oakhurst, NJ 07755**  
**Ph. 732-922-7755 Fax 732-922-9599**  
**APPLICATION FORM**

**Complete One Form Per Child!**  
**Please PRINT.**

Camper's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Street Address \_\_\_\_\_

City/State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Emergency Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Club Name \_\_\_ CHFC \_\_\_ Team \_\_\_\_\_

Camp City & State \_\_\_ Cherry Hill, NJ \_\_\_\_\_ First Day of Camp \_\_\_ 7/20/09 \_\_\_ Camp Code if Known \_G1\_

Level Requested \_\_\_\_\_

**Tuition:      Regular Program \$300.00                      Advanced Program \$350.00                      Elite Program \$400.00**

**Purchase a Coerver®/Adidas Soccer Ball for \$25.00: No \_\_\_ Yes \_\_\_ Size 4 or 5 \_\_\_**

**Shirt size:** (please circle)    YM    YL    AS    AM    AL    AXL

Method of Payment: Check:    Please make check payable to: Coerver Coaching

Credit card: VISA \_\_\_ MC \_\_\_ Discover \_\_\_                      Expiration Date \_\_\_\_\_ \*

Card Number \_\_\_\_\_ \*    Security Code \_\_\_\_\_ \*

Name on Card \_\_\_\_\_

Card Billing Address \_\_\_\_\_

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

I hereby give permission for child/ward to participate in the Coerver® Camp and agree to comply with all of its rules and regulations. I have read and understand your policy statement and agree to be held to its terms. I hereby remove the staff and management of RGB Enterprises, Inc., t/a Coerver® Coaching Camps from any liability for injuries incurred during my child/ward's participation in this soccer program. I understand that my deposit is non-refundable. I have enclosed my deposit of at least \$100. My balance is due 14 days prior to the first day of camp. If not paid by then, I will pay at the first day of camp in the form of cash, certified check or money order.

Parents/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

-----For OFFICE Use Only-----

Date Received \_\_\_\_\_ Check or Approval # \_\_\_\_\_ Amount \_\_\_\_\_