



Last Name _____

Date of Birth _____

Boy _____

Girl _____

2018 ODP Camp Participation Form (NO REFUNDS)

Please complete the following information – Type or print carefully

_____ I wish to participate in the Regional ODP Camp-**NO REFUNDS**

_____ I do not wish to participate in the Regional ODP Camp

Boys Camp Cost:

\$575 per camper if payment is received by 5/25/2018

\$625 per camper if payment is received after 5/25/2018 but before 6/8/2018

Girls Camp Cost:

\$575 per camper if payment is received by 5/25/2018

\$625 per camper if payment is received after 5/25/2018 but before 6/8/2018

***Chaperones are needed for all camps, if interested please email Gerry@cjsa.org – if CJSA receives no volunteers for an age group it may be necessary to charge that age group attendees additional money to hire a chaperone. They would need to complete a mandatory background check for PA/NJ to chaperone.**

Boys ODP Region 1 Camp Schedule

Camp ID	Date	Age Group	Location
Camp 1	July 8-12	Boys 2005	Kutztown University, PA
Camp 2	July 13-17	Boys 2004 & 2003	Kutztown University, PA
Camp 3	July 18-22	Boys 2002 & 2001	Kutztown University, PA

Girls ODP Region 1 Camp Schedule

Camp ID	Date	Age Group	Location
Camp 1	July 8-12	Girls 2001 & 2002	Rider University, NJ
Camp 2	July 13-17	Girls 2004 & 2003	Rider University, NJ
Camp 3	July 18-22	Girls 2005	Rider University, NJ

All reservations are pre-paid therefore all players names appearing on the Camp Roster are accountable for payment (**no refunds**). **CJSA must receive this completed form and payment no later than May 25, 2018 for early entry fee and no later than 6/8/18 for deadline camp entry fee date.**

Player Name Printed _____

Player Signature _____

Address _____

City _____

State _____

Zip _____

Email _____

Position: _____ GK _____ Striker _____ Midfield _____ Defender (Please note if you are right, left or center)

Please complete this form and return with your payment to:

CJSA-ODP Camp, 11 Executive Drive, Farmington, CT 06032

For Office Use only: Check No. _____ Date Received _____