



Terrier Training Soccer

www.terriertrainingsoccer.com



OVERNIGHT ACADEMY REGISTRATION FORM

(to be completed by parent or guardian)

Last Name	First Name	Middle Initial
-----------	------------	----------------

Birth date (M/D/Y)	High School	Year of H.S. Graduation
--------------------	-------------	-------------------------

Home Address number and street

City, State, Zip code

Home Phone number	Parent/Guardian's email address	Camper email address
-------------------	---------------------------------	----------------------

Mother's last name	First name	Home phone	Business phone
--------------------	------------	------------	----------------

Father's last name	First name	Home phone	Business phone
--------------------	------------	------------	----------------

Roommate Request _____ Field Player Goalkeeper

Camp shirt size (circle one) S M L XL

***Team (if attending with 15 or more teammates)** _____

Complete registration form and mail with required camp forms and non-refundable deposit (\$250 before 5/1/18 and \$275 after 5/1/18) made payable to "Terrier Training": (\$200 balance due before July 1, 2018)

Nancy Feldman
 Women's Soccer Coach – Boston University
 285 Babcock Street
 Boston, MA 02215
 Fax: 617-353-5286
 E-mail: nfeldman@bu.edu