

2023 PETER FEWING SOCCER CAMP MAIL-IN CAMP REGISTRATION

Please print or type information completely. For multiple applications, please copy this form.

CCER CAMP				
Camper's Name:			B	rthdate:/
Address:			City:	State: Zip:
Home Phone:()		_Work Phone:(
				Emergency Phone: ()
Email:				Referring Friends Name:
eam Name/Coach (if	registering for team rate) _			Note: when 10 applications from your team have been received, the team discount will be applied to your application
1 camp \$215.00 (4 *Full Day Camp R	1-day \$175) 2nd camp raf ate: \$365 (4-day \$295) 2	te \$205.00 (4-day s and Child & Team I	\$165) Team Rate (fo Rate \$355 (4-day \$285)	PS (5-13 years) Rate includes camp t-shirt & soccer ball if registered by June 1st 6+ players) \$205 (4-day \$165) Same Family Rate: 2nd child \$205.00 (4-day \$165) *Extra Hour Stay& Play option, additional \$30 (4-day \$25)
Seattle Gree		June 26-30 June 26-30	9am-12pm	Seattle University July 17-21 9am-4pm Full Day
	Seattle Greenlake		1pm-4pm 1pm-5pm*	Seattle University *Extra Hour Stay & Play July 17-21 9am-5pm Full Day* Seattle Greenlake July 17-21 9am-12pm
	Seattle Greenlake *Extra Hour Stay & Play Seattle Greenlake		9am-4pm Full Day	Seattle Greenlake July 17-21 9ain-12pin Seattle Greenlake July 17-21 1pm-4pm
	Seattle Greenlake *Extra Hour Stay & Play		9am-5pm Full Day*	Seattle Greenlake *Extra Hour Stay & Play July 17-21 1pm-5pm*
	Seattle University		9am-12pm	Seattle Greenlake July 17-21 9am-4pm Full Day
Seattle Univ	Seattle University		1pm-4pm	Seattle Greenlake *Extra Hour Stay & Play July 17-21 9am-5pm Full Day*
Seattle Unive	ersity *Extra Hour Stay & Play	June 26-30	1pm-5pm*	CAMP FULL Queen Anne Bowl July 24-28 9am-12pm
 	Seattle University		9am-4pm Full Day	Queen Anne Bowl July 24-28 1pm-4pm
Seattle Unive	ersity *Extra Hour Stay & Play	June 26-30 June 26-30	9am-5pm Full Day*	Queen Anne Bowl *Extra Hour Stay & Play July 24-28 1pm-5pm*
	Seattle Loyal Heights		9am-12pm	CAMP FULL Queen Anne Bowl July 24-28 9am-4pm Full Day
Seattle Loya		July 3-7 *4-day July 3-7 *4-day	1pm-4pm	CAMP FULL QueenAnne Bowl *Extra Hour Stay & Play July 24-28 9am-5pm Full Day*
	Seattle Loyal Heights *Extra Hour Stay & Play		1pm-5pm*	Seattle Greenlake July 31-Aug. 4 9am-12pm
	Seattle Loyal Heights		9am-4pm Full Day	Seattle Greenlake July 31-Aug. 4 1pm-4pm
	Heights *Extra Hour Stay & Play			Seattle Greenlake *Extra Hour Stay & Play July 31-Aug. 4 1pm-5pm*
	Queen Anne Bowl		9am-12pm	Seattle Greenlake July 31-Aug. 4 9am-4pm Full Day
Queen Anne Bowl		July 3-7*4-day July 3-7 *4-day	i	Seattle Greenlake *Extra Hour Stay & Play July 31-Aug. 4 9am-5pm Full Day*
Queen Anne Bowl		July 3-7 *4-day		Seattle Loyal Heights August 14-18 9am-12pm
Queen Anne	Queen Anne Bowl		9am-4pm Full Day	Seattle Loyal Heights August 14-18 1pm-4pm
Queen Anne	Queen Anne Bowl *Extra Hour Stay & Play		9am-5pm Full Day*	Seattle Loyal Heights *Extra Hour Stay & Play August 14-18 1pm-5pm*
	Seattle View Ridge		9am-12pm	Seattle Loyal Heights August 14-18 9am-4pm Full Day
Seattle View	Seattle View Ridge		1pm-4pm	Seattle Loyal Heights *Extra Hour Stay & Play August 14-18 9am-5pm Full Day*
Seattle View	Seattle View Ridge *Extra Hour Stay & Play		1pm-5pm*	Seattle Greenlake August 21-25 9am-12pm
Seattle View	Seattle View Ridge		9am-4pm Full Day	Seattle Greenlake August 21-25 1pm-4pm
Seattle View	Seattle View Ridge *Extra Hour Stay & Play		9am-5pm Full Day*	Seattle Greenlake *Extra Hour Stay & Play August 21-25 1pm-5pm*
	Seattle University		9am-12pm	Seattle Greenlake August 21-25 9am-4pm Full Day
Seattle University		July 17-21	1pm-4pm	Seattle Greenlake *Extra Hour Stay & Play August 21-25 9am-5pm Full Day*
Seattle University		July 17-21	1pm-5pm*	
1 child \$465.00	Same Family - 20 ED (9-12 YEARS)		Team Rate: \$45	kowitz, North Bend Rate includes camp t-shirt & soccer ball. .00 ADVANCED (13-17 YEARS)
Three Night		☐ Goal Keepe	er 🗖 Field Player	Three Night Camp June 28-July 1 Goal Keeper Field Player
CAMP FULI			er 🗖 Field Player	CAMP FULL July 23-26 ☐ Goal Keeper ☐ Field Player
CAMP FULI			er 🗖 Field Player	CAMP FULL Aug. 6-9 ☐ Goal Keeper ☐ Field Player
Three Night	Camp Aug. 9-12	☐ Goal Keepe	er 🗖 Field Player	Three Night Camp Aug. 9-12
JR ADVANC CAMP FULL Five Night C	Same Family - 20 ED (9-12 YEARS) July 9-14 Eamp July 16-21 est: 1st Choice:	Goal Keepe	Team Rate: \$71 er ☐ Field Player er ☐ Field Player	2nd Choice:
1 child \$845.00	Same Family - 2		Team Rate: \$83	
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	FD (9-12 VFARS)		I	ADVANCED (13-17 VEARS)
	ED (9-12 YEARS) - Aug. 6-12	Goal Kaone	er 🗖 Field Player	ADVANCED (13-17 YEARS) CAMP FULL Aug. 6-12 Goal Keeper Field Player

PAYMENT INFORMATION								
TOTAL CAMP FEES	5	Payment Type:	☐ Check	☐ Visa ☐ Mastercard				
Credit Card#	. — — — — —	Ex	. Date_					
Name on credit card:		Signature:						
my child as may be performed or prescrib mer Soccer Camp, LLC, and certify that my consideration of the instruction my child v ees or representatives from any injuries, lia and participation in any camp activity sup attendance and participation in any camp injuries. Finally, I understand that the cam	ed by a treating physician until I of child is physically fit to participal will receive regarding soccer, I agabilities, claims, damages, costs of ervised by Peter Fewing Summer activity supervised by Peter Fewing retains the right to use photog	(signature can be notified. I further understand the risks a te in all camp activities and that he/she is cove ree to indemnify and hold harmless Peter Fewir expenses incurred by me, my child, or on behir Soccer Camps, LLC. For such consideration, I fuing Soccer Camps, LLC, and accept full responsiraphs or videos taken of participants for advert	nd hazards associated with red by health or accident insing Soccer Camp, LLC, and an alf of my child, arising from, curther release all claims held ibility for the cost of all medicising and publicity purposes	ny child's participation in Peter Fewing Sururance (required for camp attendance). In y of its subsidiaries, officers, agents, emplor in connection with, my child's attendance by me and my spouse arising from my child as a result of any conly.				
_								
Medical Insurance (required):		Po	,					
		City:						
HOW DID YOU HEAR AB ☐ Attended camp last year ☐ Friend		WING SOCCER CAMPS? ade show □ Web/Internet □ Advertisement, where we have a second control of the control of	☐ Yellow Page nich one? ☐ Ot					
 Email us at peterfewing@please leave a message in For cancellations 15 days camp and \$50 administrates For cancellations, for any refundable deposit for day towards a future Peter Few Changing Sessions-There 	epeterfewingsoccercar cluding the camper's n sprior or more to your tion fee for each reside reason, 14 days or few y camp and less a \$100 ving Soccer Camp thro e is no charge to chang	ble in order for us to notify those mp.com or call the office at 206-name, parent's name and telephocamp session you will receive a ence camp. Wer prior to your camp session, you non-refundable deposit for resional the next calendar year. We sessions or camp locations, hore given for no-shows or for leaving	547-4143. If you rea one number. refund less \$20 adm ou will receive a gift idence camp. The gi	ach the answering machine, ninistration fee for each day t certificate less a \$40 non- ift certificate can be used at to space availability.				
FOR OFFICIAL USE ON	JI Y							
Confirmation sent, Dat		☐ Email ☐ Mail ☐	J Faxed					

Mail or Email Form to: Peter Fewing Soccer Camp, LLC | P.O. Box 70371 | Seattle, WA 98127 (206) 547-4143 • (888) 547-4143 • Email: peterfewing@peterfewingsoccercamp.com