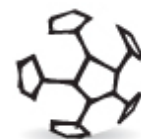




boulder county
Force



30th ANNIVERSARY
1979 | 2009

COMMUNITY · PASSION · CHARACTER · ACHIEVEMENT

2010 Force Team Camp Registration Form

Name _____ Age Group (in fall 2010) _____ Sex M / F

Street Address _____

City _____ State _____ Zip Code _____

Contact Number (____) _____ Alternate (____) _____

Email address _____ @ _____

Parent/Guardian Name(s) _____

Pleasant View Soccer Complex, 3801 47th St., Boulder, CO 8030

U11-U14 Boys and Girls Tier I teams (Red, Red II, Buffs, Buffs II), July 26-30 from 9AM-Noon

U15-U18 Girls (all teams), July 26-30 from 4-7PM

U11-U14 Boys and Girls Tier II teams, August 2-6 from 9AM-Noon

Cost: \$100.00

Checks should be made payable to **Boulder Country Force** and sent to:

Boulder County Force

2769 Iris Ave., Suite 115

Boulder, CO 80304

Phone: 303-443-8877

Fax: (720) 406-1566

Credit Card # _____ Exp _____ 3 digit security code _____

Name as it appears on card _____

Billing Address _____ Zip Code _____

Release for Medical Treatment

I (parent/legal guardian) _____ authorize all medical, surgical, diagnostic and hospital procedures as may be performed or prescribed by a treating physician for (child's name) _____.

Medical Insurance Carrier _____ Policy Number _____

Parent/Guardian Signature _____ Date _____

Name of Physician _____ Phone (____) _____

