



UKElite.com

Schedule 2009

**Summer 2009
UK Elite Soccer Camp
LUYAA Soccer Club's
Preferred Summer Soccer
Camp & Training Group!**

THE ONLY 2 WEEKS OF SOCCER CAMP IN LUYAA!

Code	Dates / Day	Location	Time	Ages	Cost
MD059A	JULY 20-24	OAKDALE SCHOOL	9am-12noon	5-14	\$150
MD059B	AUGUST 3-7	OAKDALE SCHOOL	9am-12noon	5-14	\$150
TEAMS	YOUR WEEK!	YOUR LOCATION!	DAY OR EVE	7-18	\$140



Program Description

Global Soccer Curriculum with the emphasis on scoring goals!

Daily World Cup Soccer Tournaments

Skills Challenges!

Ball & T Shirt included

International Coaching Staff!

FUN, exciting and challenging!



Additional info available at **www.UKElite.com**

Instant online registration and place confirmation available at UKElite.com

PARENT INFORMATION (Please print)

Name of Parent _____
 Street _____
 Town _____ State _____ Zip _____
 Home Phone (____) _____
 Cell/Work Phone (____) _____
 Email _____
 Emergency Contact _____
 Phone (____) _____

PLAYER / REGISTRATION INFORMATION:

Place #	Code	Name / Last	Name / First	D.O.B	Price \$
1					
2					
3					
4					
* Apply program discount after 1st place is paid in full					Sub Total
					Discount*
					Total

PAYMENT INFORMATION:

Payment Method (Please Select) Check Mastercard Visa

Credit Card Number: _ _ _ _ _ / _ _ _ _ _

Expires (mm/yy) ____ / ____

Signature _____ Date _____

CONFIRMATION:

a) Via email if address provided, OR b) by cancelled check or card statement

CREDIT POLICY:

A voucher for full program fee will be issued for any cancellation prior to program. No Cash refund.

WAIVER INFORMATION:

I certify that my child(ren) is/are in excellent health and are able to participate in physical activity including all sports. I agree to hold U.K.Elite Soccer Inc, its agents, employees and contractors harmless from any and all claims for injuries sustained during my child(ren)'s participation in the program. Permission is granted for my child to receive emergency medical treatment. Note: Please include relevant medical information in writing with this application.

Signed _____ Date _____

Mail registration to: **U.K.Elite Soccer, Inc.** Or Fax: **(973) 631 - 8743**
210 Malapardis Rd, suite 201 When registering by fax, do not
Cedar Knolls NJ 07972 mail original.



Tel: **(973) 631 - 9802** Federal Tax ID# **22-3197693**

For office use only

Rec'd _____

Chk#/Auth _____

Comp _____