



**PLAYER DEVELOPMENT CAMP**

**E.C.E.S & STP SOCCER**

Oak Brook Polo Fields, 700 Oak Brook Road, Oak Brook IL 60523

**REGISTRATION FORM**

**CONTACT INFO**

PARENT NAME/SURNAME:	
EMAIL:	PHONE:
PHONE:	
ADDRESS:	
CITY:	ZIPCODE:

**PERSONAL INFO**

PLAYER NAME:	GENDER:	
D.O.B:	AGE GROUP:	POSITION:

**CAMP INFO**

**JULY 10-13 2017**

MONDAY - THURSDAY	9 - 11:30 AM	U7 - U 14	\$ 199 .00	SELECT
MONDAY - THURSDAY	5 - 7:30 PM	U15 - U19	\$ 219 .00	SELECT

**NAME/SURNAME .....** **DATE.....**

**SIGNATURE.....**

**METHOD OF PAYMENT:** Make all checks payable to **E.C.E.S of ILLINOIS INC** and mail to:

9114 Waukegan Rd  
PO BOX 1538  
Morton Grove  
IL, 60053