

2017 MID-ATLANTIC FIELD HOCKEY CAMP

A tradition since 1978!

JULY 16 – 20 JULY 23 – 27

The MID-ATLANTIC FIELD HOCKEY CAMP is a sanctioned USA FIELD HOCKEY PARTNER CAMP.

Players from our camp may be selected for consideration for the "FUTURES PROGRAM".

The Mid-Atlantic Field Hockey Camp is held at the beautiful resort area of Cape Henlopen State Park in Lewes, Delaware. Enjoy the surf and sun on the white sands of the Atlantic Ocean during your afternoon beach break!

The Mid-Atlantic Field Hockey Camp has 7 regulation grass fields and a practice area.

OF SPECIAL INTEREST TO YOU & YOUR TEAM

You get: A **FREE** shirt when you check in. A special GOALIE'S CAMP – both sessions, 11 instructional sessions, 11 meals, a field hockey circuit championship, hockey skills contests each day, the FUTURES PROGRAM tryouts, movie showing available evenings, beach break movie, an ice cream sundae night on Tuesday, Talent Show on Wednesday, an ALL STAR game, and a team tournament.

INFORMATION – CONTACT – FRANNIE SLABONIK

MID-ATLANTIC FIELD HOCKEY LLC, 50 FROG HOLLOW LANE, MOHNTON, PA 19540

PHONE: 484-332-3670 EMAIL: contact@midatlanticfieldhockey.com

*** ONLINE REGISTRATION AT WWW.MIDATLANTICFIELDHOCKEY.COM**

Tuition is \$425.00 or *the team rate of \$415.00 when 10 or more players attend from the same team.*

Day camper rate is \$325.00; a non-refundable \$100.00 deposit must accompany each application.

Refund policy on the balance of payment:

Before June 1, full refund, except for the \$100.00 registration fee

June 1 – June 30, half refund, except for the \$100.00 registration fee. After July 1, no refund.

The balance of payment is due by June 1st. If registering after June 1st, full payment is due.

2017 REGISTRATION FORM

(RETURN THIS SECTION TO THE CAMP OFFICE)

PRINT YOUR INFORMATION NEATLY AND DETACH THIS FORM AND SEND IT TO:

THE MID-ATLANTIC FIELD HOCKEY, LLC, 50 FROG HOLLOW LANE, MOHNTON, PA 19540,

INCLUDE A NON-REFUNDABLE \$100.00 DEPOSIT CHECK PAYABLE TO: MID-ATLANTIC FIELD HOCKEY LLC

CIRCLE YOUR CHOICE OF WEEK:

JULY 16- 20 (Lewes, DE)

JULY 23 – 27 (Lewes, DE)

PLEASE CIRCLE - RESIDENT OR DAY CAMPER

NAME OF CAMPER- _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

BEST PARENT/GUARDIAN CONTACT # _____ ALTERNATE # _____

ADULT EMAIL(MANDATORY) – _____

CAMPERS DATE OF BIRTH - ____/____/____ AGE - _____

GRADE ENTERING Next Fall - _____

POSITION- GOALIE _____ FIELD PLAYER POSITION: _____

EXPERIENCE – VAR _____; JV _____; MIDDLE SCHOOL _____; BEGINNER _____

SCHOOL'S NAME - _____ SCHOOL'S TEAM COLORS - _____

COACH'S NAME - _____ COACH'S NUMBER _____ EMAIL _____

SCHOOL'S ADDRESS- _____ CITY _____ STATE _____ ZIP _____

CIRCLE ADULT SHIRT SIZE S M L XL ROOMMATE(S) REQUEST: - _____

PARENTAL INFORMATION:

NAME OF PARENTS- _____

PARENT'S ADDRESS (IF DIFFERENT FROM ABOVE) - _____

CITY _____ STATE _____ ZIP _____

DATE- _____ SIGNATURE OF PARENT(S) - _____

A \$ 100.00 DEPOSIT MUST ACCOMPANY THE APPLICATION (NON-REFUNDABLE). MAKE CHECKS PAYABLE TO:

MID-ATLANTIC FIELD HOCKEY, LLC. MAIL TO: MID-ATLANTIC FIELD HOCKEY LLC, 50 FROG HOLLOW LANE, MOHNTON, PA 19540.