



Brantford City Soccer Club Friendship Union Soccer Camp



Please ensure that you read and complete all portions of this registration form.
Please contact us if you need any assistance or if you have any questions
36 Charing Cross, Brantford, ON N3R 2H2 Tel: (519) 759-6963 Fax: (519) 759-3508

Participant/Family Information

Participant's Last Name	Participant's Last Name	Birthdate (mm/dd/yy)	Gender
Parent's Last Name	Parent's First Name	Family Address	
Phone#	Cell Phone #	Email	

Emergency Information

Name	Relationship	Contact Number
Name	Relationship	Contact Number
Name	Relationship	Contact Number

Sessions Available:

1. Aug 3 - 6	John Wright Field	9:00am - 4:00pm
2. Aug 9 - 13	John Wright Field	9:00am - 4:00pm
3. Aug 16 - 20	John Wright Field	9:00am - 4:00pm
4. Aug 23 - 27	John Wright Field	9:00am - 4:00pm

Camp Date

Camp Date	Fee	Subtotal
Total Owing		

Parents Signature: _____

Date: _____