



2012 Dover Cross Country Camp July 27th – 29th

Sign Up Form

Name: _____

Address: _____

City: _____ **State:** _____

Zip: _____

Home Phone: _____

Emergency Phone: _____

Email: _____

Costs:

Free to returning athletes, \$35 for first time attendees and family.
Payment due 7/11/2012

Gender: **M** **F** **Grade:** _____

T-Shirt: **YM S** **M** **L** **XL** **XXL**

Mail Form to:

Jerry Shaffer
2381 Sky Top Trail
Dover, PA 17315

Drop forms off prior to a summer run at the high school:

Make checks payable to: Jerry Shaffer

You must also complete the Medical Form found on the web site

Questions or comments please call Coach Shaffer at: 292-1950 or email: coachshaffer@doverxc.com

www.doverxc.com