

Credit Card Payment – Goalkeeper Camp

Name of Event: **2 Day Goalkeeper Camp – Summer 2017**

Children Names \_\_\_\_\_

Circle: Visa MC Discover

Credit Card Number: \_\_\_\_\_

EXP Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ 3 Digit Security Code: \_\_\_\_\_

Name on the Card \_\_\_\_\_

Beginners: \$115 + \$5 Credit Card Fee Total \$ \_\_\_\_\_

Advanced: \$115 + \$5 Credit Card Free Total \$ \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Billing Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Your Contact Number: \_\_\_\_\_

Mail to:  
Olympic Soccer Academy  
24513 Norwood Drive  
Plainfield, IL 60585  
Or Fax this to: **815.439.9171**

