



SUMMER SQUASH CAMPS

TRAIN WITH MOHAMED MEDHAT LEADING EGYPTIAN COACH

APPLICATION FORM – SUMMER 2009

Name: _____

Address: _____

Date of Birth: _____ M _____ F _____

Telephone (H): _____ Telephone (W): _____

E-Mail: _____ Fax No.: _____

Parent/Guardian: _____

Club and/or School: _____

T-Shirt Size: S _____ M _____ L _____ XL _____ Roommate request: _____

Please indicate the session for which you would like to register:

- | | |
|-------------------------------------|--|
| <input type="checkbox"/> July 7-12 | <input type="checkbox"/> Day Camper (six days) / \$1,200 |
| <input type="checkbox"/> July 14-19 | <input type="checkbox"/> Overnight Camper / \$1,700 |
| <input type="checkbox"/> July 21-26 | |

Return completed application form to:

Reflex Squash & Fitness, 524B South Walnut Street, Wilmington, DE 19801.

Additional information will be sent upon receipt of application.

Questions? Contact Lynette @ 302.888.1415