

Tara Jelley Danielson, C.E.O.
Steve Danielson, Executive Director
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WWW.RUSHFIELDHOCKEY.ORG

PLAYER APPLICATION

NAME _____ PHONE _____

ADDRESS _____ GRADE _____

D.O.B. _____

EMAIL (Player) _____

EMAIL (Parents) _____

POSITION: FIELD PLAYER GOAL KEEPER

NAME OF SCHOOL _____

MIDDLE SCHOOL ___ HIGH SCHOOL JV ___ HIGH SCHOOL VARSITY ___ COLLEGE ___

T-SHIRT SIZE _____

PARENTS _____

(MOTHER)

(FATHER)

MEDICAL INSURANCE _____ GRP. # _____

ADDRESS _____ (Attach copy of Medical Card)

PHONE _____

2008 RUSH SUMMER CLINICS @ PERSHING TURF FIELDS

RUSH HITTING CLINICS – 2 DAYS

WHERE: Pershing Turf Field

TIME: 8:00am – 11:00am / COST: \$275 per player

Tuesday, June 24 & Wednesday, June 25

*GOALKEEPERS Must have
own protective equipment*

*EACH SESSION is for
players who are:*

- Ages (12 years to 18 years)*
- All levels and abilities*

RUSH SHOOT & SAVE CLINICS includes GK – 2 DAYS

WHERE: Pershing Turf Field

TIME: 8:00am – 11:00am / COST: \$275 per player

Tuesday, July 15 & Wednesday, July 16

**PLEASE INCLUDE CHECK, MADE OUT TO “RUSH” AND MAIL WITH APPLICATION
AND COPY OF MEDICAL CARD TO: RUSH FIELD HOCKEY, 681 SPARTA DRIVE,
ENCINITAS, CA 92024**

Office Use Only:

Check # _____

Amount: _____