

CHICAGO FIRE JUNIORS

SUMMER CAMPS



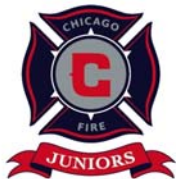
Camp Schedule						Check Here
June 15– June 18	Mon– Thurs	Foot Skills Camp	Arrowhead Park	9:00-11:00am	\$90	
June 19– July 31	Friday	Micro League 3v3	Calvary Church	1:00-2:00pm	\$60	
June 19– July 31	Friday	4v4 League	Calvary Church	2:00-3:00pm	\$60	
July 6– July 9	Mon– Thurs	GK/ Finishing Camp (U8-U11)	Calvary Church	8:30-10:00am	\$90	
July 6– July 9	Mon– Thurs	GK/ Finishing Camp (U12-U14)	Calvary Church	10:30-12:00	\$90	
July 6– July 9	Mon– Thurs	GK/ Finishing Camp (U15+)	Calvary Church	12:30-2:00pm	\$90	
July 13– July 16	Mon– Thurs	Foot Skills Camp	Seven Gables	9:00-11:00am	\$90	
July 20– July 23	Mon– Thurs	Pre-season Goalkeeping Camp (U8-U11)	Seven Gables	3:00-4:30pm	\$90	
July 20– July 23	Mon– Thurs	Pre-season Goalkeeping Camp (U12-U14)	Seven Gables	4:30-6:00pm	\$90	
July 20– July 23	Mon– Thurs	Pre-season Goalkeeping Camp (U15+)	Seven Gables	6:00-7:30pm	\$90	
Small Group Training						Check Here
June 22- July 29	Mon/ Wed	U8- U10	Seven Gables	4:30-5:45pm	\$150	
June 22– July 29	Mon/ Wed	U11- U12	Seven Gables	5:45-7:00pm	\$150	
June 22– July 29	Mon/ Wed	U13+	Seven Gables	7:00-8:15pm	\$150	
June 23– July 30	Tues/ Thurs	U8– U10	Frontier Park	4:30-5:45pm	\$150	
June 23- July 30	Tues/ Thurs	U11-U12	Frontier Park	5:45-7:00pm	\$150	
June 23– July 30	Tues/ Thurs	U13+	Frontier Park	7:00-8:15pm	\$150	

Players should check the box after the camp they wish to attend and fill out the registration form at the bottom.

All camps will be run by CFJ ADOC and staffed by the CFJ professional staff. Descriptions of the camps can be found on the CFJ website.

Please total the cost and send in form to the CFJ office or email camp registrations to summercamps@chicagofirejuniors.com

All players should bring water and ball to each training/ game. Players should dress in the CFJ training kit.



Degree
A Proud Sponsor

CFJ Summer Camps

1250 E. Diehl Rd.
Suite 301
Naperville Rd. 60563

F: (630) 245-8503s
p: (630) 245-8502

Player's Name _____
 CFJ Team _____
 Parent's Name _____
 Address _____

 E-mail _____
 Phone _____

Method of Payment Visa MasterCard
 Check

Credit Card # _____ Exp. date _____

Signature _____

Subtotal: _____
 \$10 for CC _____
 Total: _____