

# Elite Keeper Academy Registration

Player Name: \_\_\_\_\_

Parents Names: \_\_\_\_\_

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

Email Address: \_\_\_\_\_

Team Played For: \_\_\_\_\_

Glove Size: \_\_\_\_\_

Age: \_\_\_\_\_



\*Medical release and waiver  
will be sent out upon  
receipt of registration.

[www.traindec.com](http://www.traindec.com)

Check the website for more details.

**Phil Hufstader 910.431.0929**

**Kenny Bundy 910.431.2347**

**Send registration to:**

Developmental Elite Coaching  
1121 Military Cutoff Rd. #353, Suite C  
Wilmington, NC 28405

# Elite Attacking Academy Registration

Player Name: \_\_\_\_\_

Parents Names: \_\_\_\_\_

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

Email Address: \_\_\_\_\_

Team Played For: \_\_\_\_\_

Age: \_\_\_\_\_



\*Medical release and waiver  
will be sent out upon  
receipt of registration.

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Check the website for more details.

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