

FALL LEAGUE REGISTRATION

Fall 2010

CIRCLE ONE			CIRCLE ONE			
MEN'S	WOMEN'S	COED	OPEN	OVER 30	OVER 35	OVER 40

AT WHAT LEVEL DO YOU WANT TO PLAY? CIRCLE ONE (Do not leave blank)

Division 1	Division 2
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TEAM NAME	UNIFORM COLOR
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MANAGER NAME (Primary Contact)		ALTERNATE CONTACT NAME (REQUIRED)	
ADDRESS		ADDRESS	
CITY / STATE / ZIP CODE		CITY / STATE / ZIP CODE	
HOME PHONE	WORK PHONE	HOME PHONE	WORK PHONE
MOBILE PHONE	PAGER	MOBILE PHONE	PAGER
HOME FAX	WORK FAX	HOME FAX	WORK FAX
EMAIL ADDRESS		EMAIL ADDRESS	

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COMMENTS – SPECIAL REQUESTS – WE CANNOT GUARANTEE THAT SPECIAL REQUESTS WILL BE SATISFIED BUT WE WILL MAKE OUR BEST ATTEMPT TO ACCOMMODATE

Entry Fee: \$1050.00 All payment methods are accepted. Checks payable to: Dick's Sporting Goods Park

Letter of Intent and Deposit Due By: Friday, August 13th, 2010

By paying a \$525 deposit, I _____, an authorized representative of _____, state that we are committed to playing in the Colorado Rapids Adult Soccer League for the Fall 2010 season. I understand that this deposit is non-refundable should we choose not to play in the league during the Spring season. I understand that the entire fee of \$1050.00 is due by **Friday September 17th, 2010**.

Signature: _____

NOTES ● COMPLETE THE REGISTRATION FORM. ● SUBMIT THE REGISTRATION FORM AND INCLUDE THE DEPOSIT. ● REGISTRATIONS WILL NOT BE ACCEPTED WITHOUT DEPOSIT.	LEAGUE COORDINATOR –COLORADO RAPIDS ADULT LEAGUE–	
	EMAIL	nstahlecker@dsgpark.com Nate Stahlecker
	PHONE	303.727.3521
	FAX	303.727.3701

PAYMENT BY CHECK ⇒ MAKE YOUR CHECK PAYABLE TO DICKS SPORTING GOODS PARK

PAYMENT BY CREDIT CARD ⇒ PLEASE CHECK A BOX AND COMPLETE THE FOLLOWING. <input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD <input type="checkbox"/> DC <input type="checkbox"/> AMEX	
CARD NUMBER	CARD OWNER ADDRESS
EXPIRATION DATE	SIGNATURE
NAME AS IT APPEARS ON THE CARD	CARD OWNER CITY / STATE / ZIP
	CARD OWNER PHONE NUMBER

MAILING ADDRESS - DO NOT SEND CASH IN THE MAIL. FAX 303.727.3701

DICKS SPORTING GOODS PARK * COLORADO RAPIDS ADULT SOCCER LEAGUE * 6000 VICTORY WAY * COMMERCE CITY, CO 80022

OFFICE USE ONLY	DATE RECEIVED:	CHECK #	AMOUNT: \$
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