

PACIFIC HEIGHTS COMMUNITY ASSOCIATION



SOCCER REGISTRATION FORM (INDOOR 2018)

Under 5 (2014) \$90____ Under 7 (2012-2013) \$135____ Under 9 (2010 - 11) \$175____

Participant's #1 Name : _____

Birth Date / year: _____ Gender (M / F) Cost: \$ _____

Address: _____

Participant's #2 Name : _____

Birth Date / year: _____ Gender (M / F) Cost: \$ _____

Address: (if different) _____

Parent(s)/Guardian Names: _____

Address: (if different than above) _____

Main Contact PH / TXT Number: (____) _____ , Alt contact PH /TXT # : (____) _____

Main Contact E-mail address: _____

2nd Contact E-mail address: (if req'd) _____

(we email schedule and initial info from soccer@pacificeights.ca, please keep an eye out in your spam folder)

****all players must register with Goalline through SYSI**

----- PHCA TO FILL OUT ----- PHCA TO FILL OUT -----

Pacific Heights Community Soccer - indoor 2018-2019 season

Payment from: _____

Date _____ 20____, Payment Method. _____

Fee _____ /100 dollars

Received by

****Please note there will be no late registrations accepted for the season. There will also be no refunds issued after September 17, 2018******