



Soccer Youth Team Application - Winter 1, 2, & 3 2009-2010

Please fill out the application below. **A \$300 NON-REFUNDABLE DEPOSIT IS DUE WITH LEAGUE APPLICATION. FOR ONLINE APPLICATIONS, WE MUST RECEIVE THE DEPOSIT WITHIN 3 DAYS OF NOTIFICATION OF LEAGUE ACCEPTANCE. IF WE DO NOT RECEIVE THE DEPOSIT WITHIN 3 DAYS, YOUR SPOT WILL NO LONGER BE HELD IN THE LEAGUE – NO EXCEPTIONS.** Mail the completed application below and payment to Trumbull Sports Zone, LLC, 29 Trefoil Drive, Trumbull, CT 06611. If paying by check or money order, please make payable to **The Sports Zone**. Team fee for the **Winter 1 Boarded session is \$495.00 (5 games)**. The Team fee for the **Winter 2 & 3 Boarded sessions are \$795.00 per session (7 games each session)**. Team fee for the **Winter 1 Full Field session is \$1,100.00 (5 games), Winter 2 & Winter 3 Full Field session are \$1,850.00 per session**. Teams that fail to submit the full payment and completed forms by the due date given will not be permitted to play. Please note that teams are placed in leagues on a space available basis, in the order in which they are registered and paid. Cancellations must be requested at least four weeks prior to the start of the season, however deposits are non-refundable.

Club/Team Name: _____
Uniform Color: _____
Team Representative: _____ Date of Birth: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Home Phone: _____ Work Phone: _____ Cell Phone: _____
E-mail: _____
Fax: _____
Coach's Name: _____ Coach's Phone: _____

Call To Inquire About Special Deals for Playing in Multiple Sessions!! 203 268-1214 ext. 14 or 15

Season Information
Season: ____ Winter 1 ____ Winter 2 ____ Winter 3 (See schedule information for season dates)
League/Division (circle one): Youth A, Youth B
Field Preference: ____ Full "Outdoor Size" Field ____ Boarded Field
(Full Field is U11 & up for W1 and U12 & up for W2 & W3.) – No exceptions
Youth Age Category (circle one): U-9, U-10, U-11, U-12, U-13, U-14, U-15, U-16, U-17, U-19
Boys/Girls (circle one):
Comments:
Please Note: Teams will not be allowed to "play up" without prior approval from The Sports Zone management. Please register for your actual age category or speak with us about playing up before registering. Thanks!

Billing Information
Visa/MasterCard (circle one): # _____ Expires (Mo. & Yr.): _____
Amount: \$ _____ Cardholder Name: _____
If paying by check or money order, please make payable to The Sports Zone, and mail payment along with completed application.

Office Use Only:
Received Amount (circle one) Y N Enter Initials _____
Payment: Check/MO# _____ MC/VISA _____ Cash _____
Notes: _____