## SKYLINE CLUB SOCCER LEAGUE

## **SEASONAL TEAM COMMITMENT FORM - SPRING 2020**

(Please return one form for each individual team – league fees = \$470 per team.)

| CLUB NAME   |                        |                                   |   |
|---|------------------------|-----------------------------------|---|
| TEAM NAME   |                        |                                   |   |
| AGE GROUP   |                        | GENDER                            |   |
| COACH CONTACT   |                        |                                   |   |
| NAME:   |                        |                                   |   |
| PHONE # (H)   | (W)                    | (C)                               | (F)                                       |
| MAILING ADDRESS   | S                      |                                   |   |
| EMAIL   |                        |                                   |   |
| MANAGER CONTA   | <u>CT</u>              |                                   |   |
| NAME:   |                        |                                   |   |
| PHONE # (H)   | (W)                    | (C)                               | (F)                                       |
| MAILING ADDRESS   | S                      |                                   |   |
| EMAIL   |                        |                                   |   |
| NO PLAY DATES – ( Regular season includes scheduled league play | les all weekends after | r March 1 <sup>st</sup> and befor | e June 6 <sup>th</sup> . There will be no |
| IS THIS TEAM PLAT<br>CONSIDER TEAM F                            |                        |                                   | ACEMENT? YES NO                           |
| USE THIS SPACE TO   | O DESCRIBE THE         | QUALITY OF THIS                   | TEAM.                                     |
|   |                        |                                   |   |
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