

**Hub City Soccer Club
Adult League 2017 Registration Form**

Last Name _____ First Name _____

Address _____ City _____ Zip _____

Home Phone _____ Cell Phone _____

Email address _____ Date of Birth _____ (M) (F)

***** Do you play goalie or willing to play goalie? (YES) (NO)**

Please indicate what size t-shirt jersey you will need:

____ Small ____ Medium ____ Large ____ X-Large ____ XX-Large _____ Other

****SIGNATURE OF PARTICIPANT REQUIRED BEFORE PLACEMENT ON A TEAM CAN BE COMPLETED****

Name _____ Date _____

DEADLINE: June 1st, 2017

FEE: \$50.00 per league

****CREDIT CARD Information: If paying by credit card please fill out section below:****

Name on Credit Card: _____ Signature: _____

Credit Card Number: _____ Exp. Date _____

Mail Completed forms and fees to:

*****Hub City Soccer PO Box 584 Aberdeen SD 57402-0584*****