



**THURSTON COUNTY PARKS & RECREATION DEPARTMENT
SOUTHWEST WASHINGTON SOCCER ASSOCIATION**

TEAM REGISTRATION FORM SUMMER 2009
(10-GAME SEASON)

TEAM NAME: _____ TEAM COLORS: _____

TEAM REPRESENTATIVE: _____

ADDRESS: _____ CITY: _____ ZIP: _____

PHONE: DAY: _____ EVENING: _____

E-MAIL ADDRESS: _____

ALTERNATE REPRESENTATIVE: _____

PHONE: DAY: _____ EVENING: _____

E-MAIL ADDRESS: _____

LEAGUE FEE **\$800**: (circle one) Coed Open Coed Over 30 Coed Over 40

DIVISION: (circle one) Competitive Recreational

*Refund Rule-Any team that drops from league play after the season has been scheduled will be assessed 25% of the league fee. There are no refunds after the second game of the season.

LEAGUE PLACEMENT WILL BE ON A FIRST-COME, FIRST-SERVED BASIS

MAKE ONE CHECK PER TEAM PAYABLE TO TCPRD!!

PAYMENT METHOD: choose one

Amount Paid \$ _____ Cash Check # _____ Visa MasterCard
Card # _____ / _____ / _____ / _____ Expiration Date _____ / _____

Cardholder name & address (if different than above) _____

Thurston County Parks and Recreation
4131 Mud Bay Road SW
Olympia, WA 98502
(360) 786-5595