

Spring 2012 SAM SELECT
Registration Form

Please complete form below and return or fax with payment to:
Discovery Sports Center, 18031 Central Park Circle, Boyds, MD 20841 / Fax: 301-540-4276
Email: jselwood@mdsoccerplex.org

Age Group: U10 Boys U11 Boys U12 Boys U13 Boys U14 Boys

State Organization: _____

Team Information

Club/Team Name: _____

Club Manager Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: (h) _____ (w): _____ (c): _____

Email:(mandatory) _____

Team Manager Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: (h) _____ (w): _____ (c): _____

Email:(mandatory) _____

Coach's Name: _____ E-mail _____

Assistant's Name: _____ E-mail _____

Team Sideline Liaison: _____ E-mail _____

Payment Information: \$1,890.00 for U10-U12 teams, \$2,610.00 for U13-U14 teams. Teams must submit one payment. Cost includes all referee fees & tax.

Credit Card: (circle) Visa MasterCard Discover

Card Number: _____ Exp. _____ Amt: _____

V-Code: (3-digit # on back of card): _____ Zip Code: _____

Signature of Card Holder: _____

Check: (Made Payable to SAM Soccer) Number: _____ Amt: _____

Cash: All cash payments must be made in person.

* Refund Policy: Registration fee is non-refundable after February 1, 2012! However, if the Maryland SoccerPlex cannot support the league or leagues are full, the fee will be refunded. Team registrations will not be accepted after March 1, 2012. * Players must only be rostered & play on one team in the same league.