



**FALL 2010  
DOUGLAS COLLEGE SOCCER  
ACADEMY  
Registration Form**

**HEY, SIGN ME UP!**

*Please print:*

Surname: \_\_\_\_\_ First Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ Apt. #: \_\_\_\_\_  
 City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 Phone: Home: \_\_\_\_\_ Work: \_\_\_\_\_  
 Email: \_\_\_\_\_ *Circle one:* Male Female  
 Date of Birth: \_\_\_\_\_  
dd / mm / yy

**5 - 8 years:**

**Location:** Douglas College Gymnasium, New West  
**Dates and times:** 5 - 6 pm, Sundays, Sept 26 - Dec 5, 2010  
 (no classes Oct 10<sup>th</sup> or Oct 31<sup>st</sup>)  
**Registration Fee:** \$150.00 (team rate of \$130 per player for groups of six or more)

**9 - 14 years**

**Location:** Douglas College Gymnasium, New Westminster  
**Dates and times:** 6 - 8 pm, Sundays, Sept 26 - Dec 5, 2010  
 (no classes Oct 10<sup>th</sup> or Oct 31<sup>st</sup>)  
**Registration Fee:** \$200.00 (team rate of \$180 per player for groups of six or more)

**Method of Payment:** *please tick one box*

- Cheque enclosed, payable to **Douglas College**  
 VISA  MasterCard

Card # \_\_\_\_\_ Expiry Date: \_\_\_\_\_  
 Name on Card: \_\_\_\_\_ Signature: \_\_\_\_\_

**Mail to:**  
 Maria Morse, Program Assistant  
 CCL, Douglas College  
 PO Box 2503  
 New Westminster, BC V3L 5B2

**Fax to:**  
 Maria Morse - 604-527-5032  
**Tel:**  
 604-527-5757

**Walk-in:**  
 Room 1300E  
 Douglas College  
 700 Royal Ave  
 New West

OFFICIAL USE ONLY			
Semester: _____	<input type="checkbox"/>	Registered & Paid in Full	
CRN(s): _____			
Program Signature _____	Date _____	Registration Clerk Signature _____	Date _____