

POWER RUNNING SERIES 2013 REGISTRATION FORM

Last Name	First Name		
Address	City	Province PC	
Date of Birth (mm/dd/year)	T-Shirt Size (Adult):	S M L Gender: M F	
Name of Present Team/Acade	emy		
PARENT/LEGAL GUARDIAN PERSONAL INFORMATION			
Last Name	First Name		
Telephone (res)	(bus)	(cell)	
Email Address		_ @	

Coaching Staff: The training will be under the direction of Richard Bucciarelli.

Ages: Participants must be between the ages of 8 to 16.

Cost: The cost of the Program is \$180.00 + HST (Total \$203.40). Special team rates are also available.

Training Times and Dates: (please mark your choice)

THURSDAYS		FOR STAFF USE ONLY METHOD OF PAYMENT
Trio Sportsplex 601 Cityview Boulevard Vaughan, Ontario L4H 0T1	Beginning January 17, 2013 Concluding March 28, 2013 8:00 - 9:00 p.m.	DATE PAID: AMOUNT PAID: CASH CHEQUE
SUNDAYS Trio Sportsplex 601 Cityview Boulevard Vaughan, Ontario L4H 0T1	Beginning January 13, 2013 Concluding April 14, 2013 10:00 - 11:00 a.m.	Please make cheques payable to: SOCCER FITNESS INC.

601 Cityview Boulevard, 2nd Floor Vaughan, Ontario L4H 0T1

Withdrawal and Refund Policy:

Non-attendance by a participant does not constitute a notice of withdrawal. Request for refund must be submitted in writing to the Program Director prior to the start of Session 1. A \$50.00 administration fee will be applied to all refunds. *PLEASE NOTE: A \$20.00 fee will be charged for all NSF cheques.

SIGNATURE OF REGISTRANT (OR PARENT/LEGAL GUARDIAN IF REGISTRANT UNDER AGE 18)