

## **POWER RUNNING SERIES 2013 REGISTRATION FORM**

Last Name		First Name	
Address		City	Province PC
Date of Birth (mm/dd/year) T-Shirt Size (Adult): $\square$ S $\square$ M $\square$ L Gender: $\square$ M $\square$ F			
Name of Present Team/Academy			
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.			
<u>Cost</u> : The cost of the Program is \$200.00 + HST (Total \$226.00). Special team rates are also available.			
<u>Training Times and Dates</u> : (Please mark your choice.)			
			FOR STAFF USE ONLY
TUESDAYS			METHOD OF PAYMENT
Trio Sportsplex 601 Cityview Boulevard Vaughan, ON, L4H 0T1	Beginning October 15, 2013 Concluding December 17, 20 8:00 - 9:00 p.m.	)13	DATE PAID:
	·		AMOUNT PAID:
THURSDAYS			☐ CASH ☐ CHEQUE
Trio Sportsplex 601 Cityview Boulevard Vaughan, ON, L4H 0T1	Beginning October 17, 2013 Concluding December 19, 2013 8:00 - 9:00 p.m.		
			Please make cheques payable to:
SUNDAYS			SOCCER FITNESS INC.
Trio Sportsplex 601 Cityview Boulevard Vaughan, ON, L4H 0T1	Beginning October 20, 2013 Concluding December 22, 2013 10:00 - 11:00 a.m.		601 Cityview Boulevard, 2 <sup>nd</sup> 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) DATE			