

Caledon Soccer Club

Under 10 Select Team Registration

Registration Form Participant Information

First Name:

Last Name:

Date of Birth:

Position:

Address:

E Mail:

Emergency Contact:

Name:

Phone number:

Relationship:

Session Dates: Friday November 14th to Friday May 1st 2009

(Appx. 20 sessions, due to school closures this number could be reduced)

Cost: \$ 225.00

Time: 7pm to 8 pm

Location: Robert F. Hall

All sessions will be run by the Caledon Soccer Club Technical Staff