

Hub City Soccer Club

Adult Winter Co-ed Registration Form

First Name	Last Name
Address	City/Zip
Phone	Email
Date of Birth	Gender (M/F)
SIGNATURE OF PARTICIPANT REQUIR	RED BEFORE PLACEMENT ON A TEAM CAN BE COMPLETED
Name	Date
Please list the 1	Feam Name you are registering with
as a player and you	ot have a team to play for, please let us know your comfort level will be assigned to an appropriate team
Registration Dead	dline: Wednesday December 1 st , 2021
	Fee: \$60 per player
Credit Card Information: W	e only accept Visa & Mastercard – Fill out below
Name on CC	Amount Authorized
CC Number	3 Digit #
Type (Visa/Mastercard)	Expiration Date

(Completed forms can be brought to Matchbox – 110 Centennial St, mailed to HCSC PO Box 584, Aberdeen, SD 57401 or emailed to <a href="mailed-engle-eng