

Chesapeake United Soccer Club

Spring 2011 Registration Form

Travel (Competitive) U10-U14

Advanced (Recreational Plus) U10-U19

Primary Contact Information (Parent Information):

First Name	Last Name	Primary Phone:	Primary Email:
Street Address:		City:	Zip Code:

Select a Program:	<input type="checkbox"/>	Travel (Competitive)	<input type="checkbox"/>	Advanced (Recreational)
-------------------	--------------------------	----------------------	--------------------------	-------------------------

Player Information (Child Information):

First Name	Last Name	Birthday	Age Division	Gender

Submit the completed form by emailing to clubadmin@chesapeakeunited.org or fax to (757) 271-8618.

Submitting this form does not guarantee placement of your child on a soccer team. You will be contacted by the Club to inform you if your child has been placed on a soccer team or not. Should you have any questions, you may contact the Club Administrator at (757) 271-8619.