



EXCELLENCE IN ACTION
Sports And Special Events

SFH WINTER II LEAGUE PLAY TEAM REGISTRATION FORM

Division:

(Please specify gender & age)

Team name:

Contact person:

Phone number:

Email address:

DEPOSIT INFORMATION:

____ I authorize Sono Field House to charge my credit card a one-time deposit in the amount of \$_____ to reserve a team for league play.

Credit Card Information:

VISA

MASTERCARD

AMEX

DISCOVER

Card Number: _____

Security Code: _____ Exp. Date: _____

