## Infinity Sports Club

## 2016 Field Hockey Registration

First Name:			Last Name:	
Age: (As of 1/1/16): Birthdate			Grade: Schoo	l:
USA Field Hockey Membership Number			Exp	
CONTACT INFORMATION: (*At least one parents complete contact info is required. PLEASE PRINT)				
		Player	Mother *	Father *
Name				
Cell Phone #				
Cell Provider				
Email				
CLUB FEES: Checks payable to: Infinity Sports Club Mailing -P.O.BOX 10 2016 Season				013 San Martin, Ca. 95046 Fees
+	U19 & U16 - \$690.00 U14- \$570.00		\$	
	Registration fee includes- 4 University Tournaments, 2 Club Tournaments,			
	coaches, field time, referees, and team equipment)			
+	Uniforms (new players)- \$100.00 (2 jerseys, skirt, 2 socks)			\$
-	Credits (existing account credits)  Sub total			\$ -
+	Add 2.75%	to subtotal if paying by cre		
	TOTAL DUE: (subtotal + any transaction fees)			\$
		on- Divide "Total Due" in by Check, <b>Please include a</b>		
	12/10 \$	1/15 \$	2/15 \$	
	Credit Card-3	CC Billing address:		
	Name on Car	rd:	Card Type: Visa/MC/AMEX	City Only
	Card #		Exp Sec.Code	PayPal/Google Wallet-
	PayPal or Go	Conf. #		
I am interested in applying for a scholarship to help cover registration costs. \$100 deposit required.				