Directions:

1. Print out this form
2. Complete the form
3. Make check or money order payable to **Rival Sports LLC** . Credit Card option is also available via PayPal,
4. Mail check and registration to:
   5801 Oak Point Rd
   Lorain, Ohio 44053
5. Once this registration form is received with payment a team registration packet will be emailed to you complete with waiver forms. If paying through PayPal please fax this registration form to 440.282.4772.

Registering for: 5 v 5 Fever Futbol Winter Indoor Soccer League

- O Session I Nov 6-Dec 18 $495
- O Session II Jan 8-Feb 19 $495
- O Session III Mar5-Mar19 $375
- O All 3 Sessions $ 1,285 ($100 off)

Club/Association Name:_____

Team Name:_____

Age Group: U _____ O Boys O Girls O Men's O Coed

Contact:_____ _____

(First Name) (Last Name)

Street Address:_____

City:_____, State:_____ZIP:_____

Home Phone:_____-_____-_____ Cell Phone:_____-_____-_____

Email Address:_____

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5 v 5 Fever Futbol Payment

O	$495 Session I	Due Oct 29, 2010
O	$495 Session II	Due Jan 2, 2011
O	$375 Session III	Due Feb 26, 2011
O	$1,285 All three Sessions ($100 off)	Due Oct 29, 2010

Method of Payment:

O Money Order O Check #_____ O PAYPAL Reference #_____

Total Amount= _____

Any questions can be referred to the League Director Frank Griffith at 440.670.12131.