



Kentucky Indoor Soccer and Sports Registration Form

Youth Team Registration Winter 2

High School Coed, Varsity Boys & Girls, JV Boys & Girls, U14, U13 U12, U11, U10, U9, U8

Per team fee \$775. A \$25 deduction may be taken if fee is paid in full by Jan. 11th. All team fees MUST BE PAID in full prior to the first game. Winter 2 session starts Friday Jan. 20th Teams must pay a deposit of \$200 to secure a spot and that amount will then be deducted from the total team cost..

Deadline to put in a team will be Jan. 16th unless we fill BEFORE that date.

EVERY DIVISION MAY BE ASSIGNED ONE SUNDAY AM GAME DEPENDING ON THE NUMBER OF TEAMS THAT REGISTER.

NO REFUNDS AFTER THE REGISTRATION DEADLINE HAS PASSED

ABSOLUTELY NO SENIORS ON JV TEAMS.

1. Please note that we now have a Middle School Coed League. This is for 12, 13, and 14-year olds only. Will play 6v6 with 3 girls and 3 boys on the field at all times.

2. NEW LEAGUE HS Coed JV 9 and 10th grades only

CLEATS ARE NOT PERMITTED at Kentucky Indoor.

Table with columns: GIRLS' LEAGUES, BOYS' LEAGUES, HIGH SCHOOL LEAGUES. Rows include Under 14, 13, 12, 11, 10, 9, 8 for both girls and boys, and High School Coed, HS Varsity Girls, HS Varsity Boys, Middle School Coed, HS Coed JV. Includes checkboxes for 'rec' and 'comp'.

Are there any times when you absolutely CANNOT play? Please check on school functions that may cause you to want to move a game; such as Christmas parties or dances. Please list here: (Example: Thursdays between 6:00PM-8:30PM).

All age groups, depending on the number of teams who register, may be asked to play one Sunday morning game during the 8-week season. We appreciate your understanding."

TEAM INFORMATION

Team Name: _____

Contact Person: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

E-mail Address: _____

Signature: _____

Team Contact: _____

Credit Card Payment: Cards accepted are Visa, Mastercard and Discover. No American Express, please.

CHECK (drop-off or mail-in to the Lexington location below) CREDIT CARD (enter credit information below)

Type of Credit Card: _____ Credit Card #: _____ Exp. Date: _____

Name on Card: _____ Amount wish to charge: \$ _____