

## Team Registration Form

Team Name: \_\_\_\_\_

Age Group \_\_\_\_\_ Division: \_\_\_\_\_

Manager/Coach: \_\_\_\_\_

Manager's E-mail: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Zip: \_\_\_\_\_

Day Phone: \_\_\_\_\_

Eve Phone: \_\_\_\_\_

Assistant: \_\_\_\_\_

Day Phone: \_\_\_\_\_

Evening Phone: \_\_\_\_\_

I as the team manager / coach agree to have my credit card used for the purpose of insuring payment of league fees. I understand that if my team has not paid the full amount of league fees by our third game, my card will be billed for the balance of the fees.

Credit Card: (Required)

Visa      MasterCard

# \_\_\_\_\_

Exp: \_\_\_\_\_

Card holder: \_\_\_\_\_

Signature: \_\_\_\_\_

## About the Sports Centre

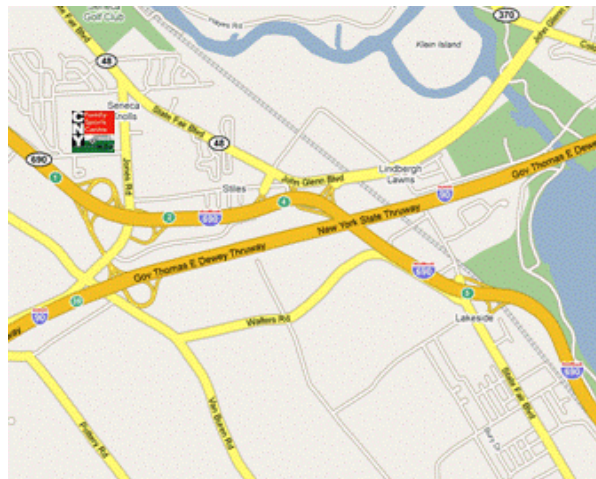
### Featuring Indoors

- ◆ Two 185' x 85', Sport Field turf (plays like natural grass) multipurpose fields with dashboards
- ◆ Seating for 320 spectators in bleachers
- ◆ One 500 sq. ft. warm-up area
- ◆ Men's & women's changing areas and rest rooms
- ◆ Education Center / Team Meeting Room
- ◆ Video arcade
- ◆ Upper Level Mezzanine for spectator viewing

### Featuring Outdoors

- ◆ Three 110 yd. x 70 yd. multipurpose natural grass fields
- ◆ Two 70 yd. x 40 yd. natural grass multipurpose fields
- ◆ One 90 yd. x 60 yd. Natural Grass multipurpose field
- ◆ Family picnic area

**Conveniently located off Route 690 at Jones Road or Exit 39 of the NYS Thruway**



## Adult Indoor Soccer



Winter/Spring  
2012



CNY Family Sports Centre  
7201 Jones Road  
Syracuse, New York 13209  
Phone 638-8866  
Fax: 638-2882

[www.CNYFSC.com](http://www.CNYFSC.com)

## League Information

### League Format::

- Each team will play 8 games. Each game consists of two 25 minute halves.
- The top four teams reach the play-offs
- Coed Teams will play 7v7. 6 field players plus a keeper. *3 Girls must be on the field at all times*
- Men's Open & Over 30 will play 6v6. 5 field players plus a keeper.
- Women's Recreational will play 7v7. 6 field players plus a keeper.

### League Fees:

**\$795.00 per session**

\* a \$100.00 deposit is required at the time of registration. The balance of league fees is due by the third week.

### Rosters:

All teams must submit a roster prior to the start of the first game. After the third week, the roster is final and no changes may be made.

### Schedule Requests:

We strive to provide the best possible service by honoring all reasonable scheduling requests. However, ALL schedule requests **MUST** be submitted in writing no later than 1 week prior to the start of the season.

### Payment Policy:

- A \$100.00 deposit is due at the time of registration in order to hold your place in the league.
- The full balance must be paid before the start of the third game.
- The Sports Centre requires each team to put a credit card down at the time of purchase to insure payment of league fees.

## Winter/Spring 2012 Indoor Soccer Start Dates

League	Day of Week	Start Date
Coed Recreational & Coed Premier	Sunday Evenings	February 19th
Men's Open	Monday Evenings	January 30th
Men's Over 30	Wednesday Evenings	March 21st
Womens Open & Womens Rec	Thursday Evenings	March 8th

Always updated for current  
schedules and standings

[www.CNYFSC.com](http://www.CNYFSC.com)

Champion, Runner-Up Awards & House Team

Uniforms for the:



provided by:

**New Age Graphix**

## Individual Players

Individual players interested in joining a team can sign up for any of our house teams. House teams will be formed for all adult divisions. Men and Women looking for a team we will be placed with other individuals.

The fee for the House team is \$80.00. This includes 8 games, a uniform and playoffs if the team finishes in the top 4 of the league.

**Upstairs inside the Sports Centre:**



- Fully Equipped Gym
- Team and Individual Training

## Individual League Registration

Individual Name: \_\_\_\_\_

Please Circle League:

Coed Premier (Sundays)

Coed Rec (Sundays)

Mens Open (Monday Evenings)

Mens Over 30 (Wednesday Evenings)

Women's Over 30 (Thursday Evenings)

Contact Phone: \_\_\_\_\_

Contact's E-mail: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Credit Card Information (Only if using Credit Card)

# \_\_\_\_\_

Card Type: Visa MasterCard Discover

Expiration Date: \_\_\_\_ / \_\_\_\_ CVC2 Code: \_\_\_\_\_

Card Holder: \_\_\_\_\_

Signature: \_\_\_\_\_

**Please Make Checks Payable to:  
CNYFSC**