



1901 Miller Road • East Petersburg, PA 17520 • Phone: 717-560-0717 • Fax: 717-560-0810

www.lancofieldhouse.com

2005-06 FALL/WINTER TEAM REGISTRATION FORM LEAGUES..... TOURNAMENTS

SOCCER (Deposit \$350) **LACROSSE** (Deposit Boys: \$500/Girls: \$400) **FIELD HOCKEY** (Deposit: \$350)

League or Tournament Start Date _____ Age Group _____

Team Name _____

BOYS **GIRLS** **COED** **MEN** **WOMEN**
Team Level: **Premier** **Division 1A** **Division 1B**

PARTICIPANT INFORMATION

Team Scheduling Contact _____

Address _____ City _____ State _____ Zip _____

H-Phone _____ Cell Phone _____ Fax _____

W-Phone _____ Email _____

Team Financial Contact (if different than above) _____

Address _____ City _____ State _____ Zip _____

Home Phone (____) _____ Fax (____) _____

Work Phone (____) _____ Email _____

****ALL TEAMS MUST FILL OUT A TEAM ROSTER FORM & HAVE ALL PLAYERS SIGN BY THE FIRST GAME****

Amount Enclosed: \$ _____ Method of Payment **Deposit** **Paid in Full**

____ Check # _____

____ Cash

____ Credit Card **VISA** **Mastercard** **Discover** **American Express**

Credit Card # _____ Exp. Date _____

Signature of Card Holder _____

A Non-Refundable Deposit is required to secure a spot-- *no holding with a credit card. No Exceptions*
RETURNED CHECK POLICY: You will be charged a \$25 service fee for any returned checks.
Discount Rate: If Paid on or before the day one week before the first game of the league season.
ONE PAYMENT PER TEAM PLEASE

Make checks payable to **LANCO Fieldhouse** And mail to **1901 Miller Road East Petersburg, PA 17520**

TEAM SPECIAL REQUESTS/CONFLICTS

**** Please note that LANCO Fieldhouse will do our best to honor special requests which are submitted *Before* the schedules are made. Due to limited space we regret that we will unable to reschedule games *AFTER* the schedule has been distributed.**

****Games, clinics, academies, camps and in other events that are cancelled due to inclement weather or for other reasons beyond the control of LFH shall not be rescheduled and there shall be no refund or pro-rated refund of any fees or field rentals.**

Office Use Only: Frontline Date _____ Initials _____