

HAWAII 808 SOCCER CLUB 2017-2018 Application Form

Glue head of photo here

Please fill in all fields as legible as possible

Player's First Name	Last Name		M. I.		
Trayer Strist Name	Last Ivaliic		1 V1. 1 .		
Date of Birth (mm/dd/yyyy)			Gender		
, , , , , , , , , , , , , , , , , , ,			□ Male	□ Female	
Home Address		City	State	Zip Code	
E-mail address(es) of Parents/Guardian					
1: 2:					
Home Phone					
Father or Guardian's Name Cell			'ell Phone / Business Phone		
			/		
Mother or Guardian's Name			Cell Phone / Business Phone		
			/		
Emergency Contact (name and telephone number other than parents/guardians):					
Physician's name and telephone number (in case of emergency):					
School Presently Attending:	Grade:		School T	eam Player? □ No	
Payment (Check a box. See the 2016 - 2017 Season Rules for details):					
1. Monthly Payment -					
I was introduced to Hawaii 808 SC by					
Please make check payable to "808 Sports Academy" or "Hawaii 808 Soccer Club"					
I would like to have my child,become a club member of Hawaii 808 Soccer Club for the year 2017-2018. I read the Hawaii 808 SC regulations and understand all rules that comply and entrust my child to Hawaii 808 Soccer Club for greater soccer skills. I agree for 808 Sports Academy LLC to use					
my child's photos, video footages and/or any play activities material taken within the club for website, advertisement and/or media usage.					
Signature		Signed Date			