

WAA Adult Soccer – Outdoor Program

Men's Half Century Club

Outdoor 2008 (April-September)

Name: _____

Address: _____

Phone: _____

Date of Birth: _____

Must be at least 45 during the season

E-Mail: _____

Cell Phone: _____

Emergency Contact: _____

Emergency Phone: _____

Games will be every Sunday at 3:00 PM.

- Site will be the same as last year, Lucent/ Alcatel field, but may change during the season (ask if you need directions).
- A Yellow and a Green jersey required. They may be purchased at the field for \$6 each.
- There are no referees - HCC discourages any hard contact, whether "fair" or not.

Registration Fee Schedule

Session Registration: \$40.00

Amount Paid for Session: \$ _____

Total: \$ _____

Office Use

Date Received: _____

Check #: _____

Check Amount: \$ _____

Session officially begins 4/20/07

(weather permitting)

And continues until indoor begins in fall

WAIVER MUST BE SIGNED

You will also be required to sign a separate Alcatel/Lucent waiver, available at the field.

WAA Waiver

I, the below named, who, as a candidate for the soccer program governed by the Wheatland Athletic Association, Inc., hereby agree to release and discharge the WAA and all officers, organizers, supervisors, agent employees, directors and helpers appointed by the Association from any claims or expenses arising from personal injury as a result of Association activities. It is understood that I agree to assume all risks incident thereto.

Signature: _____

Date: _____

Checks should be made payable to:

HCC/John Ohaver

Cash payments may be made at the field.

Please return this form with your payment to:

1505 Maple Hills Ct

Naperville, IL 60563

or you can bring payment to the field

Questions may be directed to:

John Ohaver

Day: (630)527-8814

Night: (630)527-9275

Cell: 630-417-9296

ohaverjohn@ameritech.net

Ed Sabin

(630)240-9100

edsps@msn.com

