



ST. VITAL MUSTANGS



Player Information

Name: _____
Last First

Date of Birth: _____ Male Female
Day Month Year

Address: _____

Contact Phone No.: _____ Email Address: _____

Division: MGFA Cruncher Atom Pee Wee Bantam U18 Major

Family Information

- Required for all players under the age of 18 yrs. old
- Please print clearly and complete all fields
- **PLEASE RETAIN THIS RECEIPT FOR YOUR TAX RECORDS**

Primary Contact: _____

Additional Contact: _____

Relationship to Player: _____

Relationship to Player: _____

Address: _____

Address: _____

City: _____ Postal Code: _____

City: _____ Postal Code: _____

Primary Phone No.: _____

Primary Phone No.: _____

Alt. Phone No.: _____

Alt. Phone No.: _____

Email Address: _____

Email Address: _____

Please be aware that photographs will be taken throughout the season these photos may be used on our website or in various advertising, promotional materials. Please sign below to indicate your consent should yours or your child's picture be chosen for use in this manner. Note: Individual names will not be used in conjunction with the photos.

Signature _____

Date _____

THIS POINT FORWARD FOR OFFICE USE ONLY

MGFA \$ _____ Cruncher \$ _____ Atom/Pee Wee \$ _____ Bantam/U18 \$ _____ Major \$ _____

Volunteer Deposit \$200 Credit Card Authorization Completed Other method authorized by: _____

Football Manitoba Registration - Reviewed by: _____

Registration Fee	\$ _____
Kidsport/Jumpstart	\$ _____
Other	\$ _____
Other	\$ _____
TOTAL	\$ _____

Method	Amount	Date
Cash		
Visa		
MasterCard		
Debit		