

## 5 v 5 FLAG FOOTBALL LEAGUE REGISTRATION FORM

Bob Smith Soccer Academy @The Robbinsville Fieldhouse  
Robbinsville, New Jersey



Team Name \_\_\_\_\_ Coach Name \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_ Zip \_\_\_\_\_  
Phone # \_\_\_\_\_ Cell # \_\_\_\_\_ Email: \_\_\_\_\_  
Total Due \$ \_\_\_\_\_ Cash \_\_\_\_\_ Check \_\_\_\_\_ Date \_\_\_\_\_

Fall Session - 9/22/08 - 11/10/08 Registration Deadline: 9/22/08

8 weeks - 8 Games - One 50 minute game per week

Cost: **\$850.00** per team which includes ref fees

**\$106.25 per game per team**

**(\$13.00 per player per game based on an 8 player roster)**

Please check one:

\_\_\_ Men's Open League (18 & older) – Monday nights

\_\_\_ Men's Over 30 League – Monday Nights

*\$200.00 Deposit with registration form required to hold team spot*

***BALANCE MUST BE PAID IN FULL BY October 13, 2008***

**Mail Registration Form & Payment to:**

**The Bob Smith Soccer Academy**

**36 Blairmore Drive**

**Hamilton, NJ 08690**

Web site: <http://www.bobsmithsoccer.com>

Email: [bobsmithsoccer@msn.com](mailto:bobsmithsoccer@msn.com)

Phone # 609-588-0182 Fax # 609-588-5642 Cell # 609-468-7208