

Organized Recreation & Athletics Division

SPRING/FALL FIELD HOCKEY REGISTRATION FORM

1 Harry S Truman Parkway Annapolis, MD 21401 410.222.7865 Fax: 410.222.4120

Mail completed form and payment to: A.A. County Recreation & Parks, 1 Harry S Truman Parkway, MS 3225, Annapolis, MD 21401 Attn: Sports Desk

| Sport: | Adult | Field Hockey | Season: | SPRING/FALL | Program Year: 2023 | |
|--|----------|------------------------------|---------------------------------|-----------------|---|--|
| LEAGUE REGISTRATION AND FEES: (PLEASE INDICATE) | | | | | | |
| SPRING FALL | | | | | | |
| Re | ecreatio | n \$80 per player | EARLY BIRD- Until 3/1 | Recreation \$60 | per player 8EARLY BIRD- Until 8/18 | |
| Re | ecreatio | n \$85 per player | After 3/2 to 4/15 | Recreation \$70 | per player 8/19 to Sept 10 | |
| Re | ecreatio | n \$90 per player | Apr 16 to End | Recreation \$80 | per player Sept 11 forward | |
| PARTICIPANT INFORMATION | | | | | | |
| Participant Name: | | | | | | |
| Street Ad | dress: | | | | | |
| City/State/ | /Zip: | | | Player Phone: | | |
| Email Add | ress: | | | | Grade: | |
| Other Pho | ne: | | | Date of Birth: | Age: | |
| EMERGENCY CONTACT INFORMATION: | | | | | | |
| Name: | | | | Phone: | | |
| POSITION INFORMATION: | | | | | | |
| Goalie:Yes | | YesNo <i>If</i> | No If yes do you have equpiment | | | |
| Skill Level: | | BeginnerIntermediateAdvanced | | | | |
| TEAM INFORMATION: If you request to play for a particular team or with a particular person please indicate this below. If no indication you will be placed on the 1st available team. | | | | | | |
| | | | | | | |
| OFFICE USE ONLY | | | | | | |
| FEE PAID: _ | | | CHECK #: | RECPT | #: | |