



XXI ANNUAL CHRISTMAS CUP

U12 and Older

U11 and Younger

Age Bracket/Division: _____

TEAM NAME: _____

CONTACT / COACH: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ - _____ - _____ ATL. PHONE: _____ - _____ - _____

EMAIL: _____

ALT. CONTACT: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ - _____ - _____ ALT. PHONE: _____ - _____ - _____

EMAIL: _____

PAYMENT: \$160/Team for U8 – U11 = _____

OR

PAYMENT: \$180/Team for U12 and older _____

Credit Card# _____ Exp: _____

MAKE ALL CHECKS / PAYMENT PAYABLE TO:

Corner Kick Indoor Soccer
1357 COPE AVE.
MAPLEWOOD, MN 55109
Phone: (651) 483-5000
Fax: (651) 483-3657
www.ckisoccer.com