

High School Lacrosse League:

Registration Day(s): Tuesday, Jan. 4 3:00PM – 5:00PM

Friday, Jan. 7 3:00PM – 5:00PM



Boys / Men

Girls / Women

ADULT OR HIGH SCHOOL: _____ LEVEL (Premier, Intermediate or Rec.) _____

PLAYER NAME: _____ BIRTHDATE: _____

PARENT NAME: (IF UNDER AGE 18) _____ BIRTHDATE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

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

EMAIL: _____

ALT. CONTACT: _____ BIRTHDATE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

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

EMAIL: _____

PAYMENT: \$90/Player _____

MAKE ALL CHECKS / PAYMENTS PAYABLE TO:

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