



# Golden Goal SC Adult Indoor Soccer Leagues Application



**Team Information:**

Team Name: \_\_\_\_\_  
 Team Contact Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City/Zip: \_\_\_\_\_  
 Cell Phone #: \_\_\_\_\_  
 Email: \_\_\_\_\_

League	Day of the week	X
Co-Ed B/C	Tuesday	
Co-Ed	Wednesday	
Men's	Thursday	
Men's B/C	Friday	
Co-Ed A/B	Sunday	
Men's Over 30 4v4	Sunday	

**League Information**

**Adult Leagues:** \$600 per team **Due by first game**  
**Over 30 4v4 League:** \$375 per team **Due by first game**  
*\$50 Non-refundable deposit due with application*  
**Format:** 6v6 or 4v4; includes goal keeper  
**Max Roster Size:** 12  
**Must submit signed roster before first game**

**Make Checks Payable to:**  
 Golden Goal SC  
 2650 Alkire St.  
 Golden, CO 80401

Credit cards will **ONLY** be accepted for the deposit.  
 Full league payment must be made with cash or one check.

NOTE: Credit card will be charged upon receipt.

Credit Card Type (We do not take Discover): \_\_\_\_\_

Card #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Deposit amount is \$50.00 plus a \$3.00 service charge = **\$53.00 total.**

Name on Card: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_