



LOCK-IN 2009 Registration Form



Player Name: _____

Parent Name: _____

Phone Number: _____

Email: _____

Emergency Contact: _____

Emergency Contact Number: _____

I _____ (parent signature) have read and understand the Golden Goal Liability and Indemnity Agreement Release Form.

August 7th - 9th
Returning players only
\$175/player



Drop off at 4pm on the 7th
Pick up at 12pm on the 9th