



Western Ontario Soccer League TEAM MEMBERSHIP APPLICATION



(Please print clearly and fill-in all applicable spaces)

On behalf of (club name) _____
I wish to make application for membership in the WESTERN ONTARIO SOCCER LEAGUE for the 2016
Outdoor soccer season. I hereby agree on behalf of the above named club to observe, uphold and
abide by the decisions made by the Executive Committee.

TEAM NAME

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12 Digits Maximum Including Spaces

DIVISION

Registered Colours Shirts _____ Shorts _____

Alternate Colours: Shirts _____ Shorts _____

Home Grounds: Name _____

Address _____

Preferred Playing Day: (Home games only - please circle one)

Thursday * Friday * Saturday * Sunday Kick-Off _____

Others _____

Special Requests (if any) _____

CLUB CONTACT: Name _____ Title _____

Address _____

City/Town _____ Postal Code _____

Phone: Business _____ Home _____

Cellular _____ E-mail _____

TEAM CONTACT: Name _____ Title _____

Phone: Business _____ Home _____

Cellular _____ E-mail _____

Note: Any subsequent change of Club and/or Team Contact, Field or Colours indicated above, or address change must be sent immediately to the Secretary of the league. Failure to comply with this request may result in disciplinary action being taken against the club/team. Any application for membership not received by the Annual General Meeting may be refused or subject to disciplinary action as the Executive Committee may deem fitting. Payment may be made by cheque, money order or cash, payable to the "WESTERN ONTARIO SOCCER LEAGUE".

FEES BREAKDOWN: Team Entry Fee (new club: \$830 - existing club: \$230) \$ _____

DIVISION

Divisional Cup Fee (compulsory: \$160) \$ _____

League Cup Fee (optional: \$60) \$ _____

TOTAL FEES PAID.....\$ _____

DATE: _____ Signature _____ Title: _____

OFFICE USE ONLY. Recieved by: _____ Date _____