



# Brewster Sports Center Adult Co-Ed Soccer League Fall 2011

**10 Games plus playoffs of 8 vs. 8**  
**Dates:** October 4<sup>th</sup> to December 8<sup>th</sup>  
**Playoffs and Final:** December 13<sup>th</sup> to 22<sup>nd</sup>  
**Tuesday through Thursday**  
8:00 – 9:00pm  
9:00 – 10:00pm  
10:00 – 11:00pm

**Fee:**  
**\$1500.00**

**Full Roster of 12**



All games played at the:

Brewster Sports Center  
19 Sutton Place  
Brewster, NY 10509  
Phone (845)278-2040  
Fax (845)278-2447

#### Contact Information

For more information, you can contact  
Al Morales  
at 845-406-0130  
[almorales@brewstersportscenter.com](mailto:almorales@brewstersportscenter.com)  
[www.brewstersportscenter.com](http://www.brewstersportscenter.com)



# Brewster Sports Center Adult Co-Ed Soccer League Fall 2011

## REGISTRATION FORM

Name of Team: \_\_\_\_\_

Coach: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Evening Phone: ( ) \_\_\_\_\_ Mobile Phone: ( ) \_\_\_\_\_

Fax: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

### Roster:

1) _____	7) _____
2) _____	8) _____
3) _____	9) _____
4) _____	10) _____
5) _____	11) _____
6) _____	12) _____

- Fee: \$1,500. Please make check payable to: **Brewster Sports Management**
- Please send your completed form with cash or check to:  
Brewster Sports Center  
19 Sutton Place  
Brewster, NY 10509
- \$25 bounced check fee.
- All players are responsible for their own insurance.

### **Full payment is due by game #2.**

**ALL CHECKS ARE NONREFUNDABLE.** Disclaimer: I hereby authorize the staff of Brewster Sports Center to act for me according to their best judgment in an emergency requiring medical attention and I hereby waive and release Brewster Sports Center from any and all liability for any injuries or illnesses incurred while participating at the facility or property. I have no knowledge of any physical impairment that would affect the players' participation, named to the above, in the league as outlined in the information. I also understand that Brewster Sports Center has the right to use, for publicity and advertising purposes, photographs of participants taken at the facility. I understand and accept the league fees and refund policies.

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