



**FSC Junior Varsity High School League
REGISTRATION FORM
2010-2011**

Sundays December 4, 2010-February 19, 2011

1 Scrimmage & 11 Games

Cost \$3,500

3-12 minute stop time periods

2 High School Officials

Certified Trainer at all games

TEAM NAME: _____

BILLING ADDRESS: _____

Town: _____ State: _____ Zip: _____

COACH: _____ EMAIL: _____

PHONE: Cell _____ Daytime: _____

CONTACT PERSON: _____ EMAIL: _____

PHONE: Cell _____ Daytime: _____

Please fill out information above and send this form with payment to:

Mailing address: Foxboro Sports Center
10 East Belcher Road
Foxboro, MA 02035

Fax: (508)-698-3535

Website: Foxborosportscenter.com

Checks made payable to: **Foxboro Sports Center**

Please forward roster along with registration.

Contact John Gurskis at (508)698-0505 x211 or jgurskis@foxborosportscenter.com with any questions.

Office Use Only

Registration Received: _____ Roster Received: _____

Payment Received: _____ Amount: _____ Check #: _____

CC auth code: _____ Cash: _____ Received by: _____