THE ORIGINAL sport & social CLUB

Note: all information MUST be provided for your roster to be valid. PLEASE PRINT!

HOW TO REGISTER A FULLY PAID TEAM:

1. Fill in the sport, location, day and level which you are signing up for.
2. Completely fill in all names, email addresses, phone numbers of team members.
3. Include payment information, (attach check or complete credit card information below) which includes the entire team fee. No team is confirmed without being fully paid.
4. Fax, mail, or walk your roster in. Fax: 312.850.3138
5. All attached checks and/or credit card numbers on confirmed rosters will be cashed and /or charged immediately for the full fee. The CSSC staff will not "hold" any credit cards or checks.
6. If you are paying by check and signing up for more than one league, you must write a separate check for each league.
7. CSSC will contact you to confirm your spot in the league based on a first come first paid basis.
8. All rosters are considered final by the second week of the league for T–shirt distribution.
9. No refunds will be issued for requests made on or after the start date. There is a $25 processing fee for refunds requested 2 weeks prior to the league start date.
10. There will be a $15 fee for any returned checks.

PAYMENT POLICY –
All sign-ups must be accompanied by full payment. Any roster submitted incomplete or with partial payment will not be a confirmed spot in any league.

CSSC SCHEDULING POLICY –
The CSSC reserves the right to schedule games (regular and playoff) on days other than your regularly scheduled league day/night. In extreme circumstances, the CSSC reserves the right to run a shortened season without a refund.

online registration

We encourage you to conveniently register online at **CHICAGOSOCIAL.COM**

You may also register via fax to 312.850.3138.

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Please sign us up for...

☐ TEAM ☐ INDIVIDUAL** ☐ INDIVIDUAL WITH FRIENDS ☐ EVENT

**Individual Registration is available for a limited number of leagues only. Please go to our web site www.chicagosocial.com for the listing of individual offerings.

SPORT/EVENT: _____ LOCATION: _____

DAY: _____ LEVEL: _____

ALL ROSTERS MUST BE ACCOMPANIED BY FULL PAYMENT FOR ALL LEAGUE RESERVATIONS.

CAPTAIN'S NAME (OR INDIVIDUAL PLAYER NAME) TEAM NAME

ADDRESS DATE OF BIRTH

PHONE: DAY EVENING CELL

EMAIL*

OTHER PLAYERS

NAME	EMAIL*	PHONE
NAME	EMAIL*	PHONE
NAME	EMAIL*	PHONE
NAME	EMAIL*	PHONE
NAME	EMAIL*	PHONE
NAME	EMAIL*	PHONE
NAME	EMAIL*	PHONE
NAME	EMAIL*	PHONE
NAME	EMAIL*	PHONE
NAME	EMAIL*	PHONE
NAME	EMAIL*	PHONE
NAME	EMAIL*	PHONE

CREDIT CARD HOLDER INFORMATION (visa and mastercard only)

Name: Date:

Billing Address:

Visa/MC #: Expiration Date: Verification Code‡:

Signature: Fee:

I understand by signing for my credit card I am responsible for all fees.

* By providing your email to CSSC, you agree to receive beneficial information regarding any CSSC related events and updates, trips or offers from CSSC partners or third parties via email, sent directly from CSSC. If you do not wish to receive these updates, but still want registration and schedule information e-mailed, please check the box.

‡The Verification Code is the 3 digit code on the far right of your credit card's signature line.