

Coach Name: Team Name:							
Address:	City:		State: Zip:				
Email:		Cell:					
Sport:	Gender:		Age Group:				
Choose Session:	Circle Day: Cho		noose Time		Circle Field Size:		
<b>Fall</b> : 9/20-11/28, 2021	M Tu W Th F Sa	a Su _			1/3	1/2 Full	
Winter: 11/29 - 4/3,2022  Spring: 4/4 - 6/12, 2022	**Rates in graph are per hour for the chosen season.		Seasonal Rates	1/3 Field	1/2 Field	Full Field	
			Fall/ Spring	\$850	\$1000	\$1850	
Optional Functional Training Pa			Winter	\$1600	\$1840	\$3440	
TERMS & CONDITIONS	<del>_</del>		Chosen P	avment l	Method		
Completing this form does not guarantee placement.		Chosen Payment Method					
A 25% deposit must be included for the application to be considered. The deposit is non-refundable		Deposit (25%): \$					
A credit card must be listed for the application to be considered. The credit card will not be charged if a check is provided or if cash or Venmo payment is made before the first session.		:Subsect to 3% processing fee					
		Name on Card: Exp. Date:					
The balance is due ten days before the first day of the session. Thecredit card will be charged if the balance is not received by this date.		Card #:Sec. Code: Venmo or Zelle\$					
Each participant must complete the Elev8 Athletics waiver beforeparticipating.		Check (payable to Elev8 Athletics)					
	Outside organizations must provide a certificate of insurance namingElev8 Athletics, and Bedford Sports Manage-		Please bring or fax this form with payment to Elev8 Athleticsor mail to: 317 Railroad Ave Bedford Hills, NY 10507				
Coach Signature:		Date					