## **CSC Player Addition / Release Form**

Addition	Release	
If a refund is requested state reason for player release (ieinjury, moving etc.)		
Coach Phone: _		
Coach E-Mail:		
\$\$ Amount Due	e / Requested:	
Check Number	··	
Team:	<del></del>	
Age Bracket: U	J <b>-</b>	
Player Name: _		
Jersey #:		
Address:		
Zip Code:		
Phone:		
Date of Birth: _		
Parents Name:		
Stephanie Kres 1004 Forest Lal	ke Dr.	
Chesapeake, V	A 45544	

Stephanie will contact the registrar with the player information indicating all fees are up to date. The player will then be added / removed from your roster and you will notified of same.