



ELGIN MIDDLESEX SOCCER ASSOCIATION

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519-668-2391

RECREATIONAL (L7) BLANKET PLAYING OUT APPLICATION

Instructions:
1. Complete the application by typing in all of the information requested.
2. Print the completed document and have club officials sign in the corresponding areas.
3. Mail the document along with a club cheque in the amount of \$50 to the EMSA office.
4. Applications must be received at the EMSA office by February 1st annually.

PLEASE TYPE INFORMATION INTO THE FILLABLE FIELDS

CLUB NAME: _____ **CLUB #** _____

CLUB CONTACT E-MAIL ADDRESS: _____

WE WISH TO PLAY INTO THE LAKESHORE SOCCER LEAGUE **SEASON:** _____

BOYS DIVISIONS	# OF TEAMS	GIRLS DIVISIONS	# OF TEAMS

I confirm that my club wishes to PLAY-OUT to SWRSA and will abide by all SWRSA and EMSA published rules including discipline policies and deadlines for registration.

CLUB PRESIDENT: _____

PHONE #: _____

E-MAIL ADDRESS: _____

EMSA DISTRICT USE ONLY

DATE RECEIVED: _____

APPROVED: <input type="checkbox"/>	
	DENIED: <input type="checkbox"/>

IF DENIED, REASON:	DISTRICT AUTHORIZATION
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