



**Remit to:**  
 CSYSA  
 9150 Commerce Center Cir  
 Suite 100  
 Highlands Ranch, CO 80129  
 303-346-2777 (p)  
 303-346-4842 (f)

## Registration Payment Form

Name of Association: \_\_\_\_\_

Registered With: \_\_\_\_\_

Season: \_\_\_\_\_ Spring \_\_\_\_\_ Fall      Year 20\_\_\_\_\_

Affiliation Fee: \$25.00 (Voting Eligibility – Due Annually)	\$	
Player Registration # of Players _____ @ \$12.00/player (Due Monthly)	\$	
Player Registration WSSL Advanced: # of Players _____ @ \$12.00/player	\$	
Non-Electronic Registration Fee # of Players _____ @ \$1.00/player	\$	
Coach Registration Fee # of Coaches _____ @ \$10.00/coach	\$	
TOTAL:		\$ _____

Rosters submitted by (check one)      \_\_\_\_\_ Disk      \_\_\_\_\_ E-mail

Submitted by: \_\_\_\_\_  
(Signature Required)

Date: \_\_\_\_\_