

Winnipeg Women's Soccer League

P.O. Box 62, RPO Corydon • Winnipeg, MB • R3M 3S3

Telephone (204) 284-9582

2007/08 INDOOR SEASON FEE OPTIONS

PART I - CLUB INFORMATION:

1. Team Name: _____ Division: _____
2. Team Rep's Name: _____
3. Team Rep's Address: _____
_____ Postal Code: _____

PART II - ELECTION OF OPTIONS:

Please elect one of the following options. Mark (x) by your preference and **date and sign where indicated below**:

- 1. Defer Over-paid Fees towards 2008 Outdoor Season.*
- 2. Defer Over-paid Fees towards 2008/09 Indoor Season.*
- 3. Cash Payment Refund of Over-paid Fees.*
- 4. Use \$500 extra payment for No Facility Fee increase for next 3 Seasons. **
- 5. Use \$200 extra payment for No Facility Fee increase for next Season and off-set the following Season. ***
- 6. Wish to pay the Reduced Fee for the 2007/08 Indoor Season. ****

* Please note that the Total amount of Over-paid Fees either Deferred or received as Cash Payment will be calculated by the WWSL Treasurer against any other outstanding balance.

** Please note that the No Facility Fee increase for next 3 Seasons will be extended to the Premier, First, Second & Third Divisions provided that the Club has paid a Total Fee of \$2000 by end of the 2007/08 Indoor Season.

*** Please note that the No Facility Fee increase for next Season and off-set the following Season will be extended to the Fourth, Fifth, Masters 1 & 2 Divisions provided that the Club has paid a Total Fee of \$2000 by end of the 2007/08 Indoor Season.

**** Please note that the Premier, First, Second & Third Divisions Indoor 2007/08 Reduced Fee is **\$1500** and the Fourth, Fifth, Masters 1 & 2 Divisions Indoor 2007/08 Reduced Fee is **\$1800**.

I HEREBY DECLARE THAT AS TEAM REPRESENTATIVE, I HAVE DISCUSSED THESE OPTIONS WITH MY CLUB AND I AM AUTHORIZED TO SELECT ONE OF OPTIONS PROVIDED.

Date

Team Rep's Signature

PLEASE RETURN THIS FORM TO THE WWSL EXECUTIVE