



# OCEAN CITY NOR'EASTERS

*SOUTH JERSEY'S PREMIER SOCCER TEAM*

## 2017 Spring Recreation registration form:

Parents Name: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

Childs Name: \_\_\_\_\_

Age: \_\_\_\_\_

Grade: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

Cost: \$65 per player

Checks can be made payable to:

Ocean City Nor'easters  
200 Sixth Street  
Ocean City, NJ 08226



200 SIXTH STREET, OCEAN CITY, NEW JERSEY 08226  
PHONE: (609) 432-8271 | FAX: (609) 399-4784 | WWW.OCEANCITYFC.COM