

Card Number:

2019 TAFC Donut Derby Day

Player Registration Form

Return to: OASA, 1750 SW Skyline Blvd, Ste 121, Portland, OR 97221 Phone: (503)292-1814 * Fax (503)297-4513

E-mail: player@oregonadultsoccer.com



I have read the waiver. By signing and returning this form, I agree to it. * *Signature: Gender: Female Male Last Name: First Name: Day of Birth: Year of Birth: Month of Birth: Address: State: Zip Code: City: Home Phone: Work Phone: E-mail Address: **Card Type:** OASA New - **\$45** OASA Renew - \$45 Tourney Pass - \$15 Must Include: Must Include: Must Include: 1. \$45 1. \$15 2. This form, fully completed 2. This form, fully completed 2. This form, fully completed 3. Clear photocopy of ID, 3. Clear photocopy of ID, including date of birth including date of birth 4. Color photo of your face **VALID ONLY AT 2019 TAFC Donut Derby Day** To pay using your credit card (American Express, Visa, MasterCard, Discover), please provide the following information: Cardholder's Name: Credit Card Number: Expiration Year: **Expiration Month:** Signature: FOR OFFICE USE ONLY Date Received: Expiration Date: Cash Check Credit Fee: Payment: