



Central Alberta Queens Volleyball Club 2019 - 2020

PAYMENT FORM

Player Name: _____

Team: _____ Coach: _____

☐ U17 ___ \$1900

☐ U18 ___ \$1900

Parent Phone # _____

PAYMENT OPTION

☐ **PAID IN FULL** Cheque/Credit Card Holder Ph# _____

☐ Cash

☐ Cheque

☐ E-Transfer

Email Address caqvclub@gmail.com

Password Queens2020

(make sure to put your daughters name in the reference/remarks section of the E-Transfer so that we can keep track of payments)

1st Payment is \$1000 - \$500 is non-refundable if you choose not to play after making one of the teams

☐ **DEPOSIT \$1000**

☐ Cash

☐ Cheque

☐ E-Transfer

Email Address caqvclub@gmail.com

Password Queens2020

(make sure to put your daughters name in the reference/remarks section of the E-Transfer so that we can keep track of payments)

☐ **BALANCE** (Due Feb. 1, 2020)

☐ Post-Dated Cheque

☐ E-Transfer

Email Address caqvclub@gmail.com

Password Queens2020

(make sure to put your daughters name in the reference/remarks section of the E-Transfer so that we can keep track of payments)