



CAROLINA ELITE SOCCER ACADEMY

2020 Fall CESA Club Fee: U15 - U19/20 ECRL Team Invoice

DUE - 5th OF EACH MONTH (\$232.00 AUGUST AND SEPTEMBER & \$231.00 OCTOBER)

Mail to: CESA
18 Boland Court
Greenville, South Carolina 29615

Team Name & Coach: _____

Treasurer's Name: _____

Treasurer's Telephone Number: _____

Treasurer's Email Address: _____

MONTH OF: _____

| | AMOUNT |
|---|-------------------|
| Total # Players Rostered on Team: | x \$232.00 \$ |
| *Less # Paid in Full Players: | - x \$232.00 - \$ |
| **Less # Scholarship Players: | - x \$232.00 - \$ |
| ***Less # Players with Extended Injuries/Illnesses: | - x \$232.00 - \$ |
| ****Less # Players Who Did Not Pay Monthly Club Fee: | - x \$232.00 - \$ |
| *****Less # Players with Other Reasons: | - x \$232.00 - \$ |

CHECK AMOUNT ENCLOSED: \$

***List Players Paid in Full:**

****List Players with Scholarships:**

*****List Players with Extended Injuries/Illnesses:**

******List Players Who Did Not Pay Monthly Club Fee:**

*******List Players with Other Reasons:**

