

Deposit Form - Mount Laurel United Soccer Association, Inc.

Team Name:		Today's Date:	
Team Age Group:		Girls or Boys team:	
Coach's Name:			

Deposit made by: (Name)	
Phone number:	
Email address:	

Deposit Information and/or Special Instructions: _____

	Check # or Cash	Name on Check or Cash Provider	Description of Deposit (ie, registration, uniforms, fundraiser)	\$ Amount
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
	Total			\$

Deposits are usually made on Mondays. Please allow 5-7 business days for processing, clearing and posting to your account. If you require assistance, please contact the treasurer (treasurer@mlusoccer.org.)

Note: Please include this form or reasonable facsimile with every deposit to ensure accurate accounting of your funds.