

UMYA Fall Soccer Tournament

Team Entry Form

Association or Club: _____ Age Group (circle one): U8 U10 U12

Team Name: _____ Division (circle one): Boys Girls

Coach's Name: _____ Contact Number: _____

Email: _____

Coach's Signature: _____

Club Officer: _____ Club Officer Number: _____

Club Officer Email: _____

Coach's Signature: _____ Club Officer Signature: _____

Roster: (Maximum Roster Sizes: U8 – 12 Players, U10 – 14 Players, U12 – 14 players)

Name	Birthday	Name	Birthdate
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Terms and Conditions:

- All teams will be responsible for their own insurance and medical release forms. In case of an accident or injury to, from or during the tournament, Northern Valley Youth Soccer League or Upper Milford Youth Association will not be held liable.
- Please enclose your check for \$100.00 for U8 teams and \$150.00 for U10/12 teams made payable to UMYA.
- In the event of a team or tournament cancellation, a \$25.00 fee will be assessed for administrative cost.
- Application, roster and check must be received September 30th, 2012

Send to:
 Matt Skekel
 Tournament Coordinator
 5402 Shimerville Road
 Emmaus, Pa 18049
 484-347-0768
 mskekel@gmail.com