

NEPA 3V3 Soccer Tournament Application 8/6/2011 - Deadline 7/30/2011

Team Name _____ Team Gender: Male ___ Female ___ Coed ___
 Contact Person _____ Phone: (____) _____
 Address _____ City _____ State _____ ZIP _____
 Email _____ Team Attitude: Recreational Competitive
 Circle Division Coed U-7/U8 U-9 U-10 U-11 U-12 U-13 U-14 U-15 U-16 U-17 U-18

Need more info on Rules? Check out www.nepa3v3soccer.com

PLAYER 1/Captain (Please Print)

Name _____
 Address _____
 City _____ State _____ Zip _____
 Age _____ Date of Birth _____
 Daytime Phone _____
 Email _____
 Circle T-Shirt Size: Youth **XL** Adult: **M L XL XXL**

Signature of parent or guardian if player is under 18

PLAYER 4 (Please Print)

Name _____
 Address _____
 City _____ State _____ Zip _____
 Age _____ Date of Birth _____
 Daytime Phone _____
 Email _____
 Circle T-Shirt Size: Youth **XL** Adult: **M L XL XXL**

Signature of parent or guardian if player is under 18

PLAYER 2 (Please Print)

Name _____
 Address _____
 City _____ State _____ Zip _____
 Age _____ Date of Birth _____
 Daytime Phone _____
 Email _____
 Circle T-Shirt Size: Youth **XL** Adult: **M L XL XXL**

Signature of parent or guardian if player is under 18

PLAYER 5 (Optional) (Please Print)

Name _____
 Address _____
 City _____ State _____ Zip _____
 Age _____ Date of Birth _____
 Daytime Phone _____
 Email _____
 Circle T-Shirt Size: Youth **XL** Adult: **M L XL XXL**

Signature of parent or guardian if player is under 18

PLAYER 3 (Please Print)

Name _____
 Address _____
 City _____ State _____ Zip _____
 Age _____ Date of Birth _____
 Daytime Phone _____
 Email _____
 Circle T-Shirt Size: Youth **XL** Adult: **M L XL XXL**

Signature of parent or guardian if player is under 18

PLAYER 6 (Optional) (Please Print)

Name _____
 Address _____
 City _____ State _____ Zip _____
 Age _____ Date of Birth _____
 Daytime Phone _____
 Email _____
 Circle T-Shirt Size: Youth **XL** Adult: **M L XL XXL**

Signature of parent or guardian if player is under 18

WAIVER: Signatures on the registration form signify each person has read, understands and abides by this information. There are risks connected with my participation in this tournament and its related activities. I release, waive, discharge and covenant not to sue Friends of Abington Heights Soccer (FAHS), United States Youth Soccer Association, Eastern Pennsylvania Your Soccer Association and its affiliate organizations, David Cochrane or Mariah Deibert, event sponsors, event charities and their workers, employees and directors, from all action, suits and demands whatsoever in law or in equity from demand, losses or damages on account of injury including death caused in whole or in part by the negligence of the releasee or otherwise. Players eligibility for NCAA, collegiate sports and local school districts vary. The event organizers are not responsible for determining each player's eligibility. Before registering, contact your coach or athletic director and ask how your eligibility would be affected, if at all, by registering for this tournament. Further, I hereby grant full permission for event organizers to record any or all of my participation in this event for photos, motion pictures, TV, radio, recordings, videotapes, and other media known or unknown, and to use them, no matter by who taken, in any manner for publicity, promotions, advertising, trade, or commercial purposes, without any reimbursement of any kind due me, or the need to pay me any fee.

Entry fee of \$160 per 4-6 player team must accompany your registration form. Make check or money order payable to: **NEPA 3V3 Soccer.**

Mail Registration to:
NEPA 3v3 Soccer
 P.O. Box 160
 Clarks Summit, PA
 18411
 NEPA3v3soccer@gmail.com

For Credit Card Payment Only - add \$4/, team confirmation & handling fee for all credit card entries. We only accept Visa and Mastercard. Please check one:
 Visa MC Card#
 Exp. Date _____ Print Name _____

