

PATRIOT'S CROSSROADS CHALLENGE – 2010

Gray / New Gloucester High School

Mail to:
Patriot's Crossroad Challenge
P.O. Box 120
Gray, ME04039

OFFICIAL ENTRY FORM

Team Name: _____ Club: _____ Uniform Color: _____

Coach: _____ Phone: _____ E-mail: (clearly) _____

Address: _____ City _____ State _____ Zip _____

DIVISION REQUESTED - Check one for each team entering.

Fees = U-9 & U-10-\$275 / U-11-\$350 / U-12 to 14-\$375
Make check or money order payable to: Patriot Soccer Club

Boys			Girls		
	U-09	_____		U-09	_____
	U-10	_____		U-10	_____
	U-11	_____		U-11	_____
	U-12	_____		U-12	_____
	U-13	_____		U-13	_____
	U-14	_____		U-14	_____

TEAM ROSTER

(Please print legibly or type)

No.	Full Name (alphabetical)	Date of Birth
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____
7.	_____	_____
8.	_____	_____
9.	_____	_____
10.	_____	_____
11.	_____	_____
12.	_____	_____
13.	_____	_____
14.	_____	_____
15.	_____	_____
16.	_____	_____
17.	_____	_____
18.	_____	_____

I understand that if my team is not accepted, the registration & tournament fees will be returned in full. **I further understand that if my team is accepted and later withdraws, all fees will be forfeited.** I agree to abide by all tournament guidelines as outlined in this application. No refund will be made in the event of cancellation or shortening of any matches due to inclement weather. If the entire tournament is canceled due to inclement weather, each team will be refunded all but the \$50.00 registration fee.

Signature _____ Date _____