

5th Annual Joey Uvalle Soccer Classic - April 25, 2010 "1 day only"

3 v 3 APPLICATION - Tournament Format - Entry Deadline April 18, 2010

This Application will be used as your Team Roster, Please insure your Team has a Copy of this Application for each game.

Games Times will be posted by 9 pm on April 22, 2010
Email david.arnott@cityoforlando.net for further information

Team Name: _____ **check one: BOYS/COED** **GIRLS**

AGE GROUP: pls check one (U6 __) (U7 __) (U8 __) (U9 __) (U10 __) (U11 __) (U12 __) (U13 __)
 (U14 __) (U15 __) (U16 __) (U17 __) (U18 __)

Contact Name (must have)	
Contact Address	
City State Zip	
Contact Email (must have)	
Contact Phone	Cell Phone
T-Shirt Size	AS AM AL AXL
Drinks & Food will be available for purchase @ Concession Players...Please Bring 2 Shirts...One Light / One Dark	

Entry Fee - \$175 (Non-Refundable)
****\$150 if paid before April 7th****
Cash, Check or Money Orders accepted.
Make payable to: Joseph Uvalle Trust Fund
Mail to:
 Joseph Adam Uvalle Trust
 P.O. Box 915922
 Longwood, FL 32791-5922

PLAYER #1 Birthdate (MM/DD/YYYY) / /		PLAYER #2 Birthdate (MM/DD/YYYY) / /	
Name		Name	
Address		Address	
City / State / Zip		City / State / Zip	
T-Shirt Size	YM YL AS AM AL AXL	T-Shirt Size	YM YL AS AM AL AXL
male <input type="checkbox"/>		male <input type="checkbox"/>	
female <input type="checkbox"/>	Signature - Players or Parent (if player is under 18)	female <input type="checkbox"/>	Signature - Players or Parent (if player is under 18)
PLAYER #3 Birthdate (MM/DD/YYYY) / /		PLAYER #4 Birthdate (MM/DD/YYYY) / /	
Name		Name	
Address		Address	
City / State / Zip		City / State / Zip	
T-Shirt Size	YM YL AS AM AL AXL	T-Shirt Size	YM YL AS AM AL AXL
male <input type="checkbox"/>		male <input type="checkbox"/>	
female <input type="checkbox"/>	Signature - Players or Parent (if player is under 18)	female <input type="checkbox"/>	Signature - Players or Parent (if player is under 18)
PLAYER #5 Birthdate (MM/DD/YYYY) / /		PLAYER #6 Birthdate (MM/DD/YYYY) / /	
Name		Name	
Address		Address	
City / State / Zip		City / State / Zip	
T-Shirt Size	YM YL AS AM AL AXL	T-Shirt Size	YM YL AS AM AL AXL
male <input type="checkbox"/>		male <input type="checkbox"/>	
female <input type="checkbox"/>	Signature - Players or Parent (if player is under 18)	female <input type="checkbox"/>	Signature - Players or Parent (if player is under 18)

Acceptance of Sportsmanship, Responsibility, and Waiver: Every player (or parent/guardian if the player is under the age of 18) must sign this form. Signatures on this form signify that each person has read, understands and will abide by this information. There are risks associated with participation in this soccer classic and its related activities. I release and discharge 1st Annual Joey Uvalle Soccer Classic, Event Sponsors, Event Charities (collectively known as event organizers) and the workers, employees and Directors from all action, suits and demands whatsoever in law or in equity, including but not limited to, the risk of personal property by theft or otherwise. I acknowledge that medical insurance is not provided. The event organizers are not responsible for any effect participation may have on player eligibility for other sports activities. I hereby grant permission for event organizers to record any or all of my participation in this event for photos, videos, motion pictures, TV, radio and other media, and to use them, no matter by whom taken, in any matter for publicity promotions, without need for any reimbursement or fee paid.

Received -

Check # -

WebPost -