



CO-ED 4 ON 4 INDOOR SOCCER TOURNAMENT ENTRY FORM

* @ LEAST 2 OF THE PLAYERS ON THE COURT MUST BE FEMALE *
ONLY TWO VARSITY PLAYERS ALLOWED ON EACH TEAM

Team Name _____

Team Captain _____ Phone _____

Captain's E-Mail Address _____

Official Team Roster

PLAYER NAME	GENDER	FRIENDS ID NUMBER
_____	M F	_____
_____	M F	_____
_____	M F	_____
_____	M F	_____
_____	M F	_____
_____	M F	_____
_____	M F	_____
_____	M F	_____
_____	M F	_____
_____	M F	_____
_____	M F	_____
_____	M F	_____
_____	M F	_____
_____	M F	_____
_____	M F	_____

I, _____ (team captain) have read and understand the league rules and have conveyed them to my team members. I further understand that I am responsible for the actions and behavior of my team.

Signed _____

Date _____