

# 2017 St. Pattys 3v3 Shoot-out

Team Name \_\_\_\_\_ League (Age) \_\_\_\_\_ Division (1, 2) \_\_\_\_\_

(circle one) M F Coach's Name \_\_\_\_\_

Coach/Manager Name \_\_\_\_\_

Coach/Manager Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

## TOURNAMENT DATE: March 11, 2016

Boys U8      Boys U9      Boys U10      Boys U11      Boys U12      Boys U13      Boys U14

Girls U8      Girls U9      Girls U10      Girls U11      Girls U12      Girls U13      Girls U14

Boys High School      Girls High School

## COST PER TEAM

**\$95**

**Guaranteed 3 games. 25 minute games. Championship for each division.  
All games will be on same day. 6 player max per team. Awards for finalists.**

**REGISTRATION DEADLINE: Sunday, MARCH 1, 2016**

**\*\*Team payment due in full upon registration\*\***

Check # \_\_\_\_\_ Amount \_\_\_\_\_

**(Make checks payable to: Soccer Centre. There is a \$20 charge for all returned checks)**

Credit Card # \_\_\_\_\_ Expiration Date \_\_\_\_\_ Sec. Code \_\_\_\_\_

**(Circle One: Master Card, Visa, Discover & Amex accepted) (3 digit)**

The undersigned Coach/Manager will take full responsibility for registering all participants (with Soccer Centre's waiver form), provide proper uniforms with numbers, obtain signatures, parent or player, on the roster, provide proper coaching, to consent to participate in activities of recreation at Soccer Centre, and hold harmless Soccer Centre first from any claim arising out of participation in such activities. The Coach/Manager will also take full responsibility for all payments for league fees due to Soccer Centre. **ALL FEES ARE NON-REFUNDABLE.** We are unable to guarantee specified times/days for scheduling.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Soccer Centre: 1620 Market Place Dr. Maumee, Ohio 43537 (Phone 419-893-5425, Fax 419-893-3656)**

Computer Code (office use only) \_\_\_\_\_ Staff Initial \_\_\_\_\_