

Application Deadline
March 9, 2011 Girls
March 16, 2011 Boys

Mockingbird Soccer Club's
LOUISVILLE CUP
April 16 & 17, 2011 Girls
April 30 & May 1, 2011 Boys

TEAM APPLICATION FORM

<p><u>Mail Application and Payment to:</u> Mockingbird Soccer Club 3000 Mellwood Ave. Louisville, KY 40207</p> <p><i>For Office Use Only</i> Date Rec'd: _____ Check #: _____ Amount: _____</p>
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AGE DIVISION: *Please (circle) the appropriate age group*

Boys: U10 U11 U12 U13 U14 U15 U16 U17 U18

Girls: U10 U11 U12 U13 U14 U15 U16 U17 U18

This team is a (circle one): Premier (Level A) Classic (Level B)

(Please Print)

Team Name: _____ Club: _____

League Name: _____ State Association: _____

Coach: _____ Coach's Phone: _____

Team Mgr./Contact: _____ Home #: _____ Work #: _____

Contact Address: _____ Cell #: _____

City

State

Zip

**E-mail: _____

**E-mail: _____

**** (Important all correspondence will be via e-mail, your e-mail address must be legible.)****

TEAM HISTORY

Tournaments:

Name	Division	Wins / Losses / Ties	Standings
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League Record:

Season	Wins / Losses / Ties	Standings	Season	Wins / Losses / Ties	Standings
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State Cup Finish:

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I understand that if my team is not accepted, the entry fee will be refunded in full. I further understand that once my team is accepted, the entry fee is forfeited if my team later withdraws. I agree to abide by all tournament guidelines as stated in this application. No refund will be made in the event of cancellation or shortening of any games due to inclement weather. Mockingbird Soccer Club reserves the right to combine age groups depending on number of applicants. I agree to use the tournament housing coordinator for all hotel room stays as part of our acceptance into the Louisville Cup Tournament.

Signature: _____ Date: _____