



# 2010 COLORADO STATE CUP ENTRY FORM

(PLEASE TYPE OR PRINT LEGIBLY)

GENDER:	<input type="checkbox"/> GIRLS	<input type="checkbox"/> BOYS						
AGE GROUP:	<input type="checkbox"/> U12	<input type="checkbox"/> U13	<input type="checkbox"/> U14	<input type="checkbox"/> U15	<input type="checkbox"/> U16	<input type="checkbox"/> U17	<input type="checkbox"/> U18	<input type="checkbox"/> U19

CLUB OR ASSOCIATION \_\_\_\_\_

TEAM NAME AND NUMBER \_\_\_\_\_

DIVISION \_\_\_\_\_

COACH \_\_\_\_\_ PHONE (W) \_\_\_\_\_

PHONE (H) \_\_\_\_\_

ASST. COACH OR MGR. \_\_\_\_\_ PHONE (W) \_\_\_\_\_

PHONE (H) \_\_\_\_\_

MAILING ADDRESS FOR CUP INFORMATION: NAME \_\_\_\_\_

STREET \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_

EMAIL \_\_\_\_\_

FAX \_\_\_\_\_

**\$750.00 FEE AND COPIES OF ALL PLAYERS' BIRTH CERTIFICATES MUST BE SUBMITTED WITH THIS FORM NO LATER THAN 6:00PM OF THE ESTABLISHED ENTRY DATE.**

I have read, and will abide by the CYS State Cup and US Youth Soccer National Championship rules, which will govern this competition.

Enclosed is check # \_\_\_\_\_

In the amount of \$ \_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Team Official