

**New Jersey Indoor State Cup
sanctioned by US Club Soccer
2011 Application Form**

Club Name _____ Team Name _____

Gender / Age Group _____

Jersey color: Primary _____ Alternate _____

Coach : Name: _____ E-mail Address _____
(Please identify zero or the letter O; and if "l" is the numeral one or a lower case L)

Team contact (if different): _____ E-mail Address _____
(Please identify zero or the letter O; and if "l" is the numeral one or a lower case L)

Phone (Daytime) _____ (Evening): _____

Recent Tournament Performance

Name	Record	Outcome
<i>Example – XYS Kick-off Classic</i>	<i>3-1</i>	<i>Runners-Up</i>
1.		
2.		
3.		
4.		

Notes:

- All teams and players must have valid player passes, (eg. US Club Soccer, NJYS etc).
- Tournament entrance is at the sole discretion of the tournament organizers.
- When age level brackets are filled a waiting list of additional teams will be maintained to fill in when necessary. You will be notified if you are on this list.
- An application is not considered complete unless a check is included. Any teams not accepted will have their checks refunded with 7 days of accepted lists being posted.
- Please note age, gender, club and team name on the check (e.g. U12B TSA Dynamo).
- All teams accepted will be notified by e-mail. Once your team is accepted, there can be no refund of the application fee.

Entrance fee \$470.00

**Mail check registration payable to “NJ Soccer Group” with copy of registration to:
New Jersey Soccer Group: PO Box, 3 Long Valley, NJ 07853**