



## 2017 Presidents' Day Cup – February 20, 2017

### 2017 APPLICATION FOR ACCEPTANCE

*Please print out this application and PRINT OR TYPE information*

**ENTRY DEADLINE: February 5, 2017**

**Acceptance emails will go out by February 8, 2017**

Payment Information - \$340 per team

**Credit Card (No American Express) #:** \_\_\_\_\_ **Exp. Date:** \_\_\_\_\_ **V-Code (3-digit # on back):** \_\_\_\_\_

**Amount:** \_\_\_\_\_ **Signature of Card Holder:** \_\_\_\_\_

**Check #:** \_\_\_\_\_ **Amount:** \_\_\_\_\_ (Made payable to: **Maryland Soccer Foundation**)

**Cash:** Payments must be made in person.

**Mail Application, Entry Fee and Roster to:**

Maryland Soccer Foundation  
18031 Central Park Circle  
Boyd's, MD 20841

**Refund Policy:**

By submitting this application to the tournament, you are agreeing to participate in the tournament if accepted. Additionally, once application and payment is submitted, refunds are only to be given to teams that are not accepted. If your team decides not to participate after being accepted, a refund will not be provided. If inclement weather cancels the tournament prior to the start of the first scheduled game, a maximum of 50% of the entry fee will be retained by the tournament to cover the start-up cost of the tournament.

**TEAM NAME:** \_\_\_\_\_

**AGE DIVISION (circle):**

U10	U11	U12	U13	U14	U15	U16	U17/18
2007	2006	2005	2004	2003	2002	2001	2000/1999

Manager (PRINT CLEARLY)		Coach (PRINT CLEARLY)	
Name		Name	
Address		Address	
City		City	
State	Zip	State	Zip
Home Phone		Home Phone	
Cell Phone		Cell Phone	
Email		Email	

## TEAM PERFORMANCE

Name of the State Association where your team registers: \_\_\_\_\_

Name of League where team played its Fall '15 games: \_\_\_\_\_

Division (I, II, etc. if Applicable) \_\_\_\_\_ Fall '15 Record: \_\_\_\_\_ Wins \_\_\_\_\_ Losses \_\_\_\_\_ Ties \_\_\_\_\_ Place \_\_\_\_\_

Name of League where team played its Spring '16 games: \_\_\_\_\_

Division (I, II, etc. if Applicable) \_\_\_\_\_ Spring '16 Record: \_\_\_\_\_ Wins \_\_\_\_\_ Losses \_\_\_\_\_ Ties \_\_\_\_\_ Place \_\_\_\_\_

Name of League where team played its Fall '16 games: \_\_\_\_\_

Division (I, II, etc. if Applicable) \_\_\_\_\_ Fall '16 Record: \_\_\_\_\_ Wins \_\_\_\_\_ Losses \_\_\_\_\_ Ties \_\_\_\_\_ Place \_\_\_\_\_

## TOURNAMENT RECORD

Tournament Name: \_\_\_\_\_ City, State: \_\_\_\_\_

U- \_\_\_\_\_ Age Division; \_\_\_\_\_ Wins \_\_\_\_\_ Losses \_\_\_\_\_ Ties; Finishing Position: \_\_\_\_\_ Place \_\_\_\_\_

Tournament Name: \_\_\_\_\_ City, State: \_\_\_\_\_

U- \_\_\_\_\_ Age Division; \_\_\_\_\_ Wins \_\_\_\_\_ Losses \_\_\_\_\_ Ties; Finishing Position: \_\_\_\_\_ Place \_\_\_\_\_

Tournament Name: \_\_\_\_\_ City, State: \_\_\_\_\_

U- \_\_\_\_\_ Age Division; \_\_\_\_\_ Wins \_\_\_\_\_ Losses \_\_\_\_\_ Ties; Finishing Position: \_\_\_\_\_ Place \_\_\_\_\_

## STATE CUP

Did your team participate in the last State Cup Competition held in your state? \_\_\_\_ Yes \_\_\_\_ No

How many teams participated in your age group? \_\_\_\_ Your finishing position: \_\_\_\_ Place \_\_\_\_ Wins \_\_\_\_\_ Losses \_\_\_\_ Ties