

2024 St. Pattys 3v3 Shoot-out

Friday, March 15th at the Rossford Soccer Centre Dome

Team Name				League (Age)		Division (1, 2)			
(ci	rcle one)	M F	Coach's Na	me					
Coach/Mai	nager Nam	ie							
Coach/Manager Address					City				
State	ate Zip Cell Phone_		ell Phone	Email					
			TOURNAMEN	NT DATE: Fri	day, March	17th			
Boys U8	Boys l	J9	Boys U10	Boys U11	Boys I	U12	Boys U13	Boys U14	
Girls U8	Girls U	J9	Girls U10	Girls U11	Girls U	J12	Girls U13	Girls U14	
			Boys High So	hool G	Girls High Scho	ool			
			<u>c</u>	OST PER TE	EAM_				
				\$180					
			mes. 20 minu on same day.						
		REGIS	TRATION DE	ADLINE: Su	ınday, Mar	ch 3 rd , 20	24		
		**	Геат paymen	t due in full (ıpon registr	ation**			
Check # (Make che	cks payab	le to: S	Amo	ount There is a \$		or all retur	ned checks	s)	
				Expiration Date					
(Circle One: Master Card, Visa, Discover				& Amex accepted)			(3 digit)		
provide prope participate in a participation in	r uniforms with activities of red n such activitie	h numbers creation a es. The C	take full responsible, obtain signatures Soccer Centre, and coach/Manager will NDABLE. We are	s, parent or playend hold harmless also take full res	r, on the roster, Soccer Centre ponsibility for all	provide prop first from any I payments for	er coaching, to claim arising or r league fees o	consent to out of	
			Place Dr. Ma				2-5425\		