

2010 SPRING FLING TOURNAMENT

U5 PLAY - 3 V 3 * U6 PLAY - 4 V 4
U7/8 PLAY 7 V 7 * U9/10 PLAY 8 V 8
U11 AND ABOVE PLAY 6 V 6

DATE: Saturday, MAY 22nd & Sunday, MAY 23rd, 2010

Location: Bettye Wilson Main & West 20

Fees: \$350.00 for U9-U19

\$300.00 for U5 through U8

Accepting Boys and Girls teams

(Must have player passes/player card, SIGNED MEDICAL RELEASES and be registered with USYSNV for 2009/2010). We are also accepting out of state teams. Out of state teams MUST have travel papers, medical releases, player passes and proper paperwork for any guest players. Tournament Committee may have to combine age groups due to number of teams entered. Tournament Committee may have to limit number of teams entered due to field space.

DEADLINE: 4/19/2010 AT THE SSGSL LEAGUE OFFICE

5650 W. Charleston Blvd. #13, Las Vegas, NV 89146

(If mailing in application must be postmarked by: 4/19/2010)

(Please print clearly)

Team Name: _____ Age Group: _____ BOYS/ GIRLS

League Affiliation _____ Division: ___ Bronze (if available) ___ Silver ___ Gold

(SSGSL will try and honor your request if enough teams are entered in that age group/bracket)

League record: Wins ___ Loses ___ Ties ___ Tournament record: Wins ___ Loses ___ Ties ___

Coaches Name: _____ Phone: _____

Cell phone: _____ Email address _____

Address: _____ City: _____ Zip: _____

Team Contact Person: _____ Phone: _____

Address: _____ City: _____ Zip: _____

Email address _____

Team Colors: _____ Shorts: _____ Alternate shirt: _____

Please complete Page 2

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Please make check or money order payable to SSGSL.

FEES ARE NON-REFUNDABLE AFTER 5/3/2010

Waiver of Liability: If accepted in the Spring Fling 2010 Tournament, we agree to release, indemnity, and hold harmless, the Spring Fling Tournament, SSGSL, Board Members, Officials, Coaches, Referees, Sponsors, or any other representative from action brought about through claims, lawsuits, or any type of judgment that may arise out of any injury, physical or monetary, to participants on the above named team.

I was given a copy of the tournament rules. I understand the Spring Fling 2010 rules and revisions and would like to enter the team _____, with the full understanding that all competitions will be governed by the tournament rules.

Coaches Name: _____
(Please Print)

Coaches Signature: _____
(Signature)

Date: _____ Cell Phone: _____