



UNITED STATES YOUTH SOCCER OF NEVADA
KOHL'S AMERICAN CUP
ENTRY FORM
RECREATIONAL TOURNAMENT

THIS FORM MUST BE RECEIVED BY: FRIDAY 2:00 p.m. on OCTOBER 10, 2008

Please enter our team in the respective U.S. Youth Soccer National Kohl's American Cup Tournament of the UNITED STATES YOUTH SOCCER OF NEVADA listed below. We have enclosed the fee of **\$100-(U6-U7) \$150.00-(U8-U10) \$300 (U11 AND UP)** made payable to USYSNV.

TEAM NAME: _____ AGE GROUP: _____ BOYS: _____ GIRLS: _____

MANAGER NAME: _____ H. Phone: _____

ADDRESS: _____

CITY: _____ ZIP: _____ Email: _____

CELL PHONE: _____ W PHONE: _____ FAX: _____

COACH NAME: _____ H PHONE: _____

CELL PHONE: _____ W PHONE: _____ FAX: _____

ASST. COACH: _____ H PHONE: _____

CELL PHONE: _____ W PHONE: _____ FAX: _____

TEAM COLORS: JERSEY: _____ ALT JERSEY: _____ SHORTS: _____

NAME OF LEAGUE: _____

In order for your team to be eligible for Kohl's American Cup competition, this form must be filled out completely and delivered to:

UNITED STATES YOUTH SOCCER OF NEVADA
2626 S. Rainbow Blvd #103
Las Vegas, NV 89146

Along with the appropriate fee by 2:00PM of the above listed date. Please **type or print**. Incomplete or late entries **cannot and will not** be accepted.

Only players listed on the roster will be eligible to play in Cup matches.

Kohl's American Cup will be played on **November 8th & 9th, 2008**

I have read and understand the U.S. Youth Soccer National Kohl's American Cup Tournament Directives, Rules and Regulations, and would like to enter the above team with the full understanding that all competition will be governed by the Constitution, Bylaws, rules and regulations of this association.

Signature

Date

PLEASE NOTIFY YOUR LEAGUE THAT YOU ARE ENTERED IN TOURNAMENT !