SASKATOON INDOOR SOCCER COMPETITION

SISCO PREMIER DIVISION FEMALE

(U12, U14, U16 and U18) January 22-24, 2010

*Please note that all U12 games will be 2 x 20 minute halves

Jersey Colour:

Age Groups U12, U14, U16 and U18 Entry Deadline – December 4, 2009 at 4:00pm Entry Fee - \$600 (cash or cheque only) (Cheques to be made payable to Saskatoon Youth Soccer Inc.)

Team Name:

All Correspondence to be mailed to the team's coach unless otherwise indicated on the tournament application form.

*Note: Out of province teams must provide a copy of an approved travel permit to the SYS office no later than two weeks prior to the tournament date

Current Provincial/State Aff	(Province/State)	(Age Grou	p)	(Division)	
Requested Age Group:	U-12 [] U-14 []	U-16[] U-18[]	FEMALE		
Coach's Name:			Manager's Name:		
Address:			Address:		
City:			City:		
Postal Code:			Postal Code:		
Ph. (H):	Ph. (W):	Ph. (F	I):	Ph. (W):	
Email:			Email:		
Under 12 – Born in 1998/1999 Under 14 – Born in 1996-1997 Under 16 – Born in 1994/1995 Under 18 – Born in 1991/1992/1993			Saskatoon Youth Soccer Inc. 150 Nelson Road Saskatoon, SK S7S 1P5 Ph: (306) 975-3413 Fax: (306) 975-3416 Email: sysi@sasktel.net - www.saskatoonsoccer.com		
NOTE: ENTR		IDERED RECEIVED THE ENTRY. PLEAS		RECEIVED COMPLETE BY FAX.	
Each team is guara All games will be pl	nteed three (3) games – ayed at the SaskTel Spo art mid-afternoon on Fi	he Saskatoon Youth Soc U12, U14 and U16 play 8 orts Centre – 150 Nelson riday January 22, 2010.	3v8, U18 play 7v7 on a Road	a 55yd x 70yd field orepared to play at some point	
your application, we on the SYSI website.	will send you a letter cov	rering complete Tourname	ent details. A list of acc	ament deadline. Upon accepting cepted teams will also be posted nings is limited so please apply	
after December 4, 20	009 will forfeit their entire their entire tournament of ociation.	e entry fee. Entry forms bligations (scheduled gam	without the appropria es) will face disciplina	ee. Teams that cancel their entries ate fee will not be accepted. ry actions in accordance with their	
		For SYSI Office Use			
Date Received:	Post Mark:	Receipt #	Date:		