



Pickering Soccer Club U9 Indoor Festival

Please type or print all information

PLEASE FILL OUT 1 FORM FOR EVERY TEAM!!

THANK YOU.

Please forward payment and completed application form to:

David Lord admin-rec@pickeringssoccer.ca 1975 Clements Rd, Pickering L1W 4C2

Club Name: _____ **Team Name:** _____

Date of Event: **Boys & Girls:** Thursday December 27, 2018

Festival Location: Pickering Soccer Centre, 1975 Clements Rd, Pickering

Entry Fee: \$250/per team entered **Application Deadline: Dec 11, 2018**

Division: (circle one each)

Division: U9

Gender: Girls Boys

Level: Tier 1 Tier 2

Shirt Colour: _____ Shorts Colour: _____

Coach's Name: _____ Cell Phone: _____

Address: _____ Coach Email: _____

City: _____ Postal Code: _____

*** Contact Person: _____ Position: _____

Email Address: _____ Cell Phone: _____

*** Make sure that all information is filled out correctly, especially the team's contact information. Each teams' point of contact must have an email address. All festival information will be sent to that email address