



2012 TEAM REGISTRATION FORM

Club/Team Name: _____

Division (please circle all that apply):

7 v 7 Format \$225/team: U9B Boys

10 v 10 Format \$500/team: U9A Boys U11 Boys U13 Boys U15 Boys

TEAM CONTACT INFORMATION

Coach/Team Contact Name: _____

Address: _____

Day Phone: _____

Cell Phone: _____

Email Address: _____

Estimated number of coaches to attend coach's clinic/reception (Sat. 7-8:30 pm) _____

Estimated number of players to attend player's clinic (Sun. 8-9:30 am): _____

PAYMENT INFO:

Register online at www.salisburychampionships.org or mail checks and forms to:

Wicomico County Recreation, Parks, & Tourism

8480 Ocean Hwy

Delmar, MD 21875 *(Make checks payable to Wicomico County)*

Forms can also be FAXED to 410-341-4996

Registration Deadline: Friday, May 4, 2012 at 5 pm. Entry fees are non-refundable.

REGISTRATION CHECKLIST:

1. Submit Team Registration Fees (online or mail checks payable to Wicomico County).
2. Submit Completed Team Registration Form (mail or FAX)
3. Submit team roster with player and parent signatures (mail or FAX)

For other tournament information, contact tournament director Matt McGinnis at 443-366-4060 or email at momcginnis@salisbury.edu