

GOODSPORTS USA



MARCH MADNESS

'1 DAY' SOCCER TOURNAMENTS

<u>DAY</u>	<u>DATE</u>	<u>TIME</u>	<u>DIVISION</u>
Saturday	3/5	6:30pm-10:30pm	U13 Girls
Saturday	3/12	6:30pm-10:30pm	U11 Girls
Saturday	3/19	8:00am-12:00pm	U9 Girls
Saturday	3/19	12:00pm-4:00pm	U11 Boys
Saturday	3/19	6:30pm-10:30pm	U13 Boys
Sunday	3/20	8:00am-12:00pm	U9 Boys

ONLY \$295 PER TEAM

+ \$35 REF FEE FOR ENTIRE TOURNAMENT!

Played on Full 220' x 120' Turf Field in Bubble

8v8 (7 field players + a goalie)

Maximum roster 16 players

All Tournaments are within a 4 hour time frame

Teams guaranteed 3 thirty minute games + final

Great opportunity to get prepared for the outdoor spring season!

LIMITED SPOTS AVAILABLE!

Taking first 4 teams registered for each tournament.

2903 HIGHWAY 138 WALL TOWNSHIP, NEW JERSEY 07719

732-681-8898 OR VISIT US ONLINE @ WWW.GOODSPORTSUSA.COM

MARCH MADNESS SOCCER TOURNAMENTS

Captain/
Contact Name: _____ Team
Name: _____

Contacts
Email Address: _____

Address: _____ City: _____ State: _____ Zip: _____

Team Contact
Phone #: (Day) _____ (night) _____

Amt.
Paid: _____ Date: _____ Authorized
Signature on Card: _____

CASH CREDIT CARD CARD TYPE: Visa MC Discover AMEX
 CHECK Card # _____ Exp. Date: _____

A \$100.00 deposit, a credit card and a completed registration form is required to hold your team's spot in the tournament. Teams are accepted on a first come first serve basis. Limited Spots!
NO REFUNDS WILL BE GIVEN.

Please Read Carefully and sign the following Registration-Understanding/Waiver.

In consideration for being allowed to participate in any way in GOODSPORTS USA athletic/sports programs, and related events, I the undersigned voluntarily agree to assume full and complete responsibility for any injury or accident which may occur to the above named child during or in connection with GOODSPORTS USA or it's staff while they/I am on the premises of GOODSPORTS USA. I acknowledge that at GoodSports USA, I/they will participate in activities that may involve, among other things, physical contact with persons or objects, including the ground, and may incur a risk of injury. I specifically waive, give up and release GoodSports USA and its staff, from all liability for any claim for damages which I/the above named child may have relating to injuries or illness that I/they may sustain. In signing this waiver, I certify that I/the above child are in good health, with no chronic illness or abnormal tendencies. In the event of an emergency in which I/the above child requires medical care, I authorize GOODSPORTS USA to act for me and obtain whatever medical, surgical or dental examination, diagnosis and/or treatment is deemed necessary. GOODSPORTS USA is not responsible for my personal belongings which are lost, stolen, or damaged. I agree to have all fees paid in full before the first game. I further understand that I should be aware of my/the above named child's physical limitations and agree not to exceed them. I agree to review the rules and inspect the facilities and if I believe it is unsafe I will advise his or her coach and refuse to participate.

Sign: _____ Print Name: _____

REQUIRED FUTSAL EQUIPMENT

Use One form per team. Please contact us for Additional Forms if needed.

Taking first 4 teams registered per tournament. Limited Spots!

MARK YOUR AGE GROUP/TOURNAMENT:

- | | | | |
|--------------------------|------------|----------------|-----------|
| <input type="checkbox"/> | MARCH 5TH | 6:30PM-10:30PM | U13 GIRLS |
| <input type="checkbox"/> | MARCH 12TH | 6:30PM-10:30PM | U11 GIRLS |
| <input type="checkbox"/> | MARCH 19TH | 8:00AM-12:00PM | U9 GIRLS |
| <input type="checkbox"/> | MARCH 19TH | 12:00PM-4:00PM | U11 BOYS |
| <input type="checkbox"/> | MARCH 19TH | 6:30PM-10:30PM | U13 BOYS |
| <input type="checkbox"/> | MARCH 20TH | 8:00AM-12:00PM | U9 BOYS |