

Sandlot Academy of South Jersey Spring Starter Tournament

Official Registration Form

Team Information

Team Name: _____

Address: _____

City: _____ ST: _____ ZIP: _____

Contact Name: _____

Phone (H): _____ Phone (W): _____

Cell: _____ E-Mail: _____

Contact Phone during event: _____

Event

_____ Sandlot Academy of South Jersey 11U Spring Starter – 03/27/2010 – 03/28/2010

_____ Sandlot Academy of South Jersey 12U Spring Starter – 04/10/2010 – 04/11/2010

\$425 (ages 11U) _____ \$425 (ages 12U) _____

Send this sheet, with check for \$425 made out to:

**The Sandlot Academy of South Jersey
368 Berlin-Cross Keys Road
Sicklerville, NJ 08081**

ATTN: Sandlot Academy of South Jersey Spring Starter Tournament

Phone: (856) 719-0111

e-mail: tournament@sandlotsjersey.com

General Information

*Roster Sheet must be mailed or e-mailed by Mar 15th, 2010.

*Birth Certificates must be readily available upon request during tournament.

*8 teams max per age group.

*Payments due no later than Mar 8th 2010.

*Teams can reserve a spot with a \$150 deposit due by Mar 1th 2010. Full refund of deposit if team withdraws before Mar 8th 2010. No refunds guaranteed if team withdraws after Mar 8th 2010. Increment Weather Refund Policy listed in the General Rules.

Sandlot Academy of South Jersey Spring Starter Tournament

TEAM NAME: _____

DIVISION: 11 12

MANAGER: _____

CONTACT PERSON: _____

CONTACT'S CELL PHONE NUMBER: _____

ROSTER (15 players maximum)

<u>PLAYER</u>	<u>D.O.B.</u>	<u>UNIFORM #</u>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____
11. _____	_____	_____
12. _____	_____	_____
13. _____	_____	_____
14. _____	_____	_____
15. _____	_____	_____

ASSISTANT COACHES:

SCOREKEEPER:
