

KAOS INVITATIONAL

SOCCER TOURNAMENT

August 21-23, 2009

Team Name: _____ Club: _____

Age Division for 2009-2010 season: **(Circle One)**

Girls: U-9 – U-10 – U-11 – U-12 – U-13 – U-14

Boys: U-9 – U-10 – U-11 – U-12 – U-13 – U-14 – U-15 – U-16 – U-17 – U-18 – U-19

If there are a sufficient number of teams in your age group, do you prefer playing in the more competitive grouping? **(Circle One)** Yes No

State Association: _____

Coach's Name: _____ Home # ___ - _____ Work # ___ - _____

Address: _____

City _____ State _____ Zip _____

Manager: _____ Home # ___ - _____ Work # ___ - _____

Address: _____

City _____ State _____ Zip _____

Send all Correspondence to: **(Circle One)** Coach – Manager – Other

E-mail address for all correspondence (required) _____

Tournament Record (Last 3 entered):

Tournament _____ Won: _____ Lost: _____ Tied: _____ Place: _____

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Tournament _____ Won: _____ Lost: _____ Tied: _____ Place: _____

I understand that if a team is not accepted, the entry fee will be returned in full. I further understand that if a team is accepted and later withdraws, the entry fee is forfeited and that no refund will be made in the event of cancellation or shortening of any matches due to inclement weather.

Signature: _____ Date _____

ENTRY DEADLINE: August 3, 2009.

Make check payable to the "Kaos Invitational" and mail to:

NOTE: When I receive your application you will get an email that day stating that it was received. When you mail the form send me an email so I can inform you of non receipt on August 7th. It's bad for both of us to be surprised. ☺

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