

Sarasota Cup - 2022

Visitor Questionnaire



TEAM INFORMATION

TEAM NAME: _____ AGE DIV: Under ____ BOYS OR GIRLS: ____

PRIMARY TEAM CONTACT: _____
(Primary Contact during the Tournament)

CELL PHONE # OF TEAM CONTACT: _____

HOME CITY: _____ HOME STATE: _____

HOW DID YOU HEAR ABOUT THE TOURNAMENT (check all that apply):

- Email
- Direct Mail
- State Websites
- Gotsoccer
- Other _____

HOUSING INFORMATION

WHAT IS THE TOTAL NUMBER OF PEOPLE TRAVELING IN YOUR GROUP (including team members)?
_____ (Do not duplicate numbers from other teams in your club if you have multiple teams in the tournament.)

If from outside the Sarasota area, what are the dates of your stay for the tournament?
From April ____ 2022 to April/May ____ 2022

HOW MANY MOTEL/HOTEL ROOMS WILL YOU BE USING? _____

WHILE AT THE TOURNAMENT WHICH HOTEL (Be Specific)? _____

TELEPHONE # OF HOTEL: _____

All teams are required to complete this form even if they're not staying overnight in the Sarasota area

This form must be completed and submitted by April 22, 2022.