

**Michael Herrin Memorial Soccer Tournament (Nov 9-Nov 10, 2019) Team Entry/Roster Form
Deadline for Payment/Entry Sunday October 27, 2019 (\$225 Per Team - 3 Game Guarantee)**

Recreational League/Team: _____ Team Color: _____

Team Grade Division: 1-2 Coed (7v7) ; 1-2 Girls (7v7); 3-4 Coed (7v7); 3-4 Girls (7v7); 5-6 Coed (9v9) ; 5-6 Girls (9v9)
 ; 7-8 Coed (11v11) ; 7-8 Girls (11v11) _____

**** Max roster of 14 for first through fourth grades and 18 for fifth through eighth grades.**

**** If the number of carded club or select travel players is more than half of the roster, team must be approved in advance.**

**** Players must meet both age and grade requirements to participate and may only play on one team.**

	Name	Gender	Grade	Birth Date	Select/Club? Y/N
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					

I certify all players played in our recreational league, meet age, grade, and level of play eligibility requirements (coaches should bring copies of birth certificates and grade certification for each player at check-in):

Head Coaches Name (Print): _____ Signature: _____

Mobile Phone During Tournament: _____ Email: _____

Email Team Entry/Roster Form to: gregwmcculloch@gmail.com. Send Payment to (payable SYSA) by deadline to: Harrisburg Park District Attn: SYSA 921 W Poplar St Harrisburg, IL 62946 ; Questions Call Greg: 618-841-6731