

**Annapolis Royal
Natal Day Soccer Tournament
Registration Form 2010**

Team Name: _____

Team Colors: _____ or _____

Coach or Contact Name: _____

Email: _____

Home Phone: (____)_____ Work Phone: (____)_____

Other Phone: (____)_____ Fax: (____)_____

Address:

Division:

- U8 Coed U10F U14M U16M
 U10M U10Coed U14F U16F

Registration Fee:

- U8 U10 U14 M&F & U16 M U16 F
 \$140 \$160 \$260 \$175

Team Roster: (NB: teams may have more players than are dressed for each game)

#	Full Name	#	Full Name
1.		12.	
2.		13.	
3.		14.	
4.		15.	
5.		16.	
6.		17.	
7.		18.	
8.		19.	
9.		20.	
10.		21.	
11.		22.	