

Bordentown Community Soccer Association
31st Annual BCSA Thanksgiving Soccer Tournament
 November 27, 28, & 29, 2009
 Tournament Application

Team Information:

Boys / Girls (Circle one)

Age Division: U9 U10 U11 U12 U13 U14 U15 U16 U17 U18 U19

Team Name : _____ Club Name : _____

Team Contact: _____ Phone: _____

Address: _____ Cell Phone: _____

City, State, Zip: _____ Email Address: _____

Required - Print clearly

Fax Number: _____

Primary Team Color: _____ Alternate Team Color: _____

Team Flighting Information:

Level of Play (circle one): Premier National Club

League Play: Name of League: _____

Flight: _____

Fall, 2009 League Record: ____W ____L ____T

Spring 2008 League Record: ____W ____L ____T

Spring 2008 and Fall 2009 Tournament Information:

| Tournament Name | Record | Place |
|-----------------|-----------|---|
| 1. _____ | __W__L__T | 1 st , 2 nd , 3 rd , Other |
| 2. _____ | __W__L__T | 1 st , 2 nd , 3 rd , Other |
| 3. _____ | __W__L__T | 1 st , 2 nd , 3 rd , Other |
| 4. _____ | __W__L__T | 1 st , 2 nd , 3 rd , Other |
| 5. _____ | __W__L__T | 1 st , 2 nd , 3 rd , Other |

COMMENTS - Please use this area for any tournament related comments or to provide us with more information to help flight your team properly.

Team Roster: Team Name: _____

1. Player Name: _____
2. Player Name: _____
3. Player Name: _____
4. Player Name: _____
5. Player Name: _____
6. Player Name: _____
7. Player Name: _____
8. Player Name: _____
9. Player Name: _____
10. Player Name: _____
11. Player Name: _____
12. Player Name: _____
13. Player Name: _____
14. Player Name: _____
15. Player Name: _____
16. Player Name: _____
17. Player Name: _____
18. Player Name: _____

A state certified roster must be included with application. Please include a list of guest players if you know them now, otherwise additions and deletions can be made at registration. Registration fee of \$375.00 (U-9 and U-10) or \$425.00 (U-11 to U19) should be made payable to **BCSA Thanksgiving Tournament**.

The completed application, state certified roster and registration fee and bond, if applicable, should be mailed to:

BCSA Thanksgiving Tournament
Attn: Tournament Directors
272 Dunns Mill Rd, #306
Bordentown, New Jersey 08505

Application deadline is October 31, 2009 Notification of receipt of application will be emailed when received. Schedules will be posted on the Web Site when available (approximately 1 week prior to tournament).

*** <http://www.bordentownsoccer.org> ***

IMPORTANT AGREEMENT - *Please read the following information and check the box to indicate your agreement:

I understand and agree if my team is not accepted, I will be given a full refund of my entry fee. I further understand and agree once my team is accepted and later declines, the entry fee is forfeited. If the tournament is cancelled for any reason prior to the start of the tournament, the Bordentown Community Soccer Association will refund a minimum of 80% of a team's entry fee. I have read the tournament guidelines and the tournament rules as stated on the tournament website and agree to abide by such guidelines and rules.

Initial Here: _____ **I agree.**

Questions should be directed to the Tournament Directors who can be reach via:

Mollie Anderson-Theriault By e-mail: NJDC24@aol.com By phone: 609-291-8733