

UMYA Fall Soccer Tournament

Team Entry Form

Association or Club: \_\_\_\_\_ Age Group (circle one): U7 U10 U14 U19  
U8 U12 U16

Team Name: \_\_\_\_\_ Division (circle one): Boys Girls

Team Color: \_\_\_\_\_

Coach's Name: \_\_\_\_\_ Contact Number: \_\_\_\_\_

Email: \_\_\_\_\_

Coach's Signature: \_\_\_\_\_

Club Officer: \_\_\_\_\_ Club Officer Number: \_\_\_\_\_

Club Officer Email: \_\_\_\_\_

Club Officer Signature: \_\_\_\_\_

Terms and Conditions:

- All teams will be responsible for their own insurance and medical release forms. In case of an accident or injury to, from or during the tournament, neither EPYSA, Northern Valley Youth Soccer League nor Upper Milford Youth Association will not be held liable.
- Please enclose your check for \$100.00 for U7 and U8 teams and \$150.00 for U10/12 teams or \$175.00 for U14, U16 and U19 teams made payable to UMYA.
- In the event of a team or tournament cancellation, a \$25.00 fee will be assessed for administrative cost.
- Application, roster and check must be received September 30<sup>th</sup>

Send to:

Matt Skekel

Tournament Coordinator

5402 Shimerville Road

Emmaus, Pa 18049

484-347-0768

[mskekel@gmail.com](mailto:mskekel@gmail.com)

