

The Governor's Cup Invitational Soccer Tournament
Sunflower Soccer Association
P.O. Box 750194
Topeka, Kansas 66675
(785) 233-9700 Fax (785) 233-0135



Team Entry Form



Please complete the information on this page. **Mandatory information is shown in RED.** Print the form and mail a copy of it with your entry fee and certified team roster to the Governor's Cup. Please make checks payable to the Governor's Cup. **YOUR APPLICATION WILL NOT BE COMPLETE UNTIL ALL NECESSARY PAPERWORK AND YOUR ENTRY FEE ARE RECEIVED.** Teams will receive a confirmation upon acceptance to the tournament with all necessary information.

Team Name _____
Division: Recreational **BOYS** **GIRLS** (circle one) Age group: U- _____
Coach's Name: _____ Asst. Coach: _____
Coach's Day/Cell Phone: _____ Asst. Coach's Day/Cell Phone: _____

CORRESPONDENCE WILL BE MAILED TO:

Name: _____ *Day/Cell Phone: _____ Evening Phone: _____
Address: _____ Fax Number: _____
City: _____ State: _____ Zip Code: _____ E-Mail: _____

The Head Coach has _____ team(s) in this tournament. If there is more than one team, please list the age division, team names, and any scheduling accommodations you would like us to consider when preparing the schedules in the below. **Please understand that all requests will be reviewed but may not be able to be accommodated.**

Association or League in which your league plays: _____
Division and level in which your team competes: U- _____ Level _____
League record last fall season: _____ League record last spring season: _____

Tournament Play History in the past 12 months. List the tournament name, your age division and record:

| Tournament Name | Level | Team Record (Wins-Losses-Ties) | Results |
|-----------------|-------|--------------------------------|---------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

In the event that your team's age division and the next age division are lacking enough teams to compete and combining age divisions is necessary, would your team be willing to play up to the next division for this tournament? Yes No (circle one)

I HAVE READ THE RULES GOVERNING THIS TOURNAMENT AND UNDERSTAND THAT PARTICIPATION IN THE TOURNAMENT CONSTITUTES THE APPROVAL OF COACHES, PLAYERS, AND PARENTS FOR THE USE OF PICTURES, NAMES, AND ADDRESSES FOR THE PUBLICITY AND PROMOTION OF THE TOURNAMENT.

Coach's signature: _____ (Your application will not be accepted without the Coach's signature. Your application will not be complete until all necessary paperwork and your entry fee are received.)

ALL RECREATIONAL TEAMS MUST COMPLETE THE FOLLOWING INFORMATION AND THE LEAGUE OR STATE REGISTRAR MUST SIGN IT.

League Verification for Recreational Teams: I hereby certify that the _____ team, coached by _____ and playing in the _____ league is a RECREATIONAL team as defined in the tournament rules.

League/State Registrar _____ Name (Print) _____
Date _____ Phone Number _____