

31st Annual Idaho Falls Shootout

May 15th – 16th, 2010

Deadline: April 1, 2010

Registration Fee: U11/U12 (8v8) - \$320 U13 & up (11v11) - \$440

Tournament Directors: Jamie & Kirk Prestwich, jprestwich@postregister.com

Registrar: Debbie Shepherd, debbie@vandals.us

Team placement, check the appropriate category:

Gender: Girls: ___ **Boys:** ___ **Age Group:** U12 ___ U14 ___ U16 ___ U17 ___ U18 ___ U19 ___

APPLICATION MUST BE FULLY COMPLETED

TEAM NAME: _____

CITY: _____ STATE: _____ ZIP: _____

HEAD COACH: _____ PHONE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

EMAIL ADDRESS: _____

MANAGER: _____ PHONE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

EMAIL ADDRESS: _____

SEND ALL CORRESPONDENCE TO HEAD COACH ___ **MANAGER** ___

State official who signs travel papers: _____

Phone – Day _____ Night _____

Description of your club (premier/select/recreational) _____

Previous Season Record: Won ___ Lost ___ Tie ___

Has this team participated in prior Idaho Falls Shootout Tournaments? Yes ___ No ___

Please accept our application to participate in the 31st Annual Idaho Falls Shootout Tournament on May 14, 15 & 16, 2010 in Idaho Falls, Idaho. I understand that during tournament registration on Friday, May 14th I must submit to the tournament committee my national affiliate player passes, a roster properly signed by my District Commissioner or my State Association and medical release forms. I understand that those teams from out of state, registered with USYSA must submit travel papers during registration.

My check for \$320 (U11/U12) or \$440 (U13 and older) payable to Bonneville Youth Soccer League is enclosed.

Signed: _____ Date: _____

Submit completed registration to: I.F. Shootout 2010, 295 Pevero Dr., Idaho Falls, ID 83401

Committee Use: A B

B 12 14 16 17 18 19

G 12 14 16 17 18 19

Date received: _____

Check amount: _____