

# IRVINE SOCCER TOURNAMENTS

PRINT FORM AND MAIL WITH PAYMENT

CIRCLE ONE: WINTER - SPRING - MEMORIAL - SUMMER

GENDER / YEAR BORN OF TEAM \_\_\_\_\_

CLUB / TEAM NAME \_\_\_\_\_

LAST NAME OF COACH \_\_\_\_\_

COACH EMAIL \_\_\_\_\_

LAST NAME OF MANAGER \_\_\_\_\_

## FEES:

CIRCLE ONE

\$525.00 BORN 2009, 2008, 2007, 2006

\$625.00 BORN 2005, 2004, 2003, 2002, 2001, 2000, 1999, 1998

MAKE CHECK PAYABLE TO - IRVINE SOCCER TOURNAMENTS

MAIL TO:

IRVINE SOCCER TOURNAMENTS  
1048 IRVINE AVE. # 305  
NEWPORT BEACH, CA. 92660