

1st Annual 3V3 Soccerpolooza at Zona Rosa – Aug 1, 2009

3 v 3 APPLICATION - Tournament Format – Entry Form must be post marked by July 1, 2009

This Application will be used as your Team Roster, Please insure your Team has a Copy of this Application for each game.

**Game Times will be posted July 15, 2009 @ www.Zonarosa.com
Email efremshimlis@yahoo.com for further information**

Team Name: _____

check one: BOYS/COED [] GIRLS [] check one: REC [] COMP []

AGE GROUP: Pls check one (U9___) (U10___) (U11___) (U12___) (U13___) (U14___) (U15___) (U16___)
(U17___)

Contact Name (must have)	
Contact Address	
City State Zip	
Contact Email (must have)	
Contact Phone	Cell Phone
T-Shirt Size	AS AM AL AXL

**\$50 Non-Refundable Entry Fee must accompany your application form.
Check or Money Orders accepted.
Make payable to: Efreim Shimlis
Mail to:
Attn: Efreim Shimlis - Zona Rosa
8787 N. Dixon Ave
Kansas City, Missouri 64153**

Drinks & Food will be available for purchase @ Concession
Players...Please Bring 2 Shirts...One Light / One Dark

PLAYER #1 Birthdate (MM/DD/YYYY) / /	PLAYER #2 Birthdate (MM/DD/YYYY) / /
Name	Name
Address	Address
City / State / Zip	City / State / Zip
T-Shirt Size	T-Shirt Size
YM YL AS AM AL AXL	YM YL AS AM AL AXL
male [] <input checked="" type="checkbox"/>	male [] <input checked="" type="checkbox"/>
female []	female []
Signature - Players or Parent (if player is under 18)	Signature - Players or Parent (if player is under 18)
PLAYER #3 Birthdate (MM/DD/YYYY) / /	PLAYER #4 Birthdate (MM/DD/YYYY) / /
Name	Name
Address	Address
City / State / Zip	City / State / Zip
T-Shirt Size	T-Shirt Size
YM YL AS AM AL AXL	YM YL AS AM AL AXL
male [] <input checked="" type="checkbox"/>	male [] <input checked="" type="checkbox"/>
female []	female []
Signature - Players or Parent (if player is under 18)	Signature - Players or Parent (if player is under 18)
PLAYER #5 Birthdate (MM/DD/YYYY) / /	
Name	
Address	
City / State / Zip	
T-Shirt Size	
YM YL AS AM AL AXL	
male [] <input checked="" type="checkbox"/>	
female []	
Signature - Players or Parent (if player is under 18)	

Acceptance of Sportsmanship, Responsibility, and Waiver: Every player (or parent/guardian if the player is under the age of 18) must sign this form. Signatures on this form signify that each person has read, understands and will abide by this information. There are risks associated with participation in this 3v3 Soccerpolooza and its related activities. I release and discharge 1st Annual Soccerpolooza at Zona Rosa, Event Sponsors, Event Charities (collectively known as event organizers) and the workers, employees and Directors from all action, suits and demands whatsoever in law or in equity, including but not limited to, the risk of personal property by theft or otherwise. I acknowledge that medical insurance is not provided. The event organizers are not responsible for any effect participation may have on player eligibility for other sports activities. I hereby grant permission for event organizers to record any or all of my participation in this event for photos, videos, motion pictures, TV, radio and other media, and to use them, no matter by whom taken, in any matter for publicity promotions, without need for any reimbursement or fee paid.

Received -

Check # -

Amount Enclosed -