



Blackstrap Classic Soccer Tournament
SATURDAY, June 14TH, 2008
8 AM – 5 PM
REGISTRATION FORM



Town and Team Name _____

Coach: _____ Ph.: _____

Address: _____

No. of players _____ *Cost is \$6 per player; minimum \$48 per team*

Age group: *please check one*

- U - 6 3 v 3
 U - 8 4 v 4
 U - 10 7 v 7

For Your Info:

Min. 3 games/team (no scores kept)
Every player wins a medal, &
gets a free treat
Concession available

Amount: \$ _____

Deadline for registration is **Tuesday, June 3rd, 2008**
Hurry! Space is limited

Remember to bring:
Lawn chairs, sunscreen & hats, bug spray, water!

Please email, mail or fax form with payment to:

Roseanne Carter

Email: carterfamily@yourlink.ca

Box 647

Dundurn, SK

S0K 1K0

Phone: 492-2192

Fax: 659-2128 (attention-Roseanne Carter)

