



SPRING SHOOTOUT

REGISTRATION FORM

2007 Family First Sports Park Spring Shootout Tournament Registration Form

Please complete this form and return it with your entry fee to:

Family First Sports Park
ATTN: Jordan Rimmer
8155 Oliver Road Erie, PA 16509
Fax: (814) 866-8066

I am registering for : Spring Shootout (May 18-20, 2007)

Team Information

Team Name: _____

Girls Divisions *

Boys Divisions **

Coach: _____

11 & under

5th grade

12 & under

6th grade

13 & under

7th grade

14 & under

8th grade

15 & under

9th grade

High School Open
(9th -11th grade)

High School Open
(10th -11th grade)

Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ (day) Phone: (____) _____ (eve)

Fax: (____) _____

*Ages are as on January 1, 2007

** Grade levels are for current school year (2006-2007.)

E-mail: _____

We will be: commuting staying at Family First Sports Park

Team Roster

Name	Height	Age	DOB	Jersey #
1. _____				
2. _____				
3. _____				
4. _____				
5. _____				
6. _____				
7. _____				
8. _____				
9. _____				
10. _____				
11. _____				
12. _____				