



# YMCA 2017 INDOOR SOCCER TOURNAMENT

## NOVEMBER 10 TO NOVEMBER 12, 2017

**Girls U9/10, U11/12, U13/14 • Coed U9/10, U11/12, U13/14**

Register as a team for this tournament open to all area recreational league soccer players. Only two players on the team rosters may be select players. Select teams must play up one division. Including the goalie, the U9/10 and U11/12 teams will play with 6 players and U13/14 teams will play with 5 players. There is a maximum of 12 players per roster. Teams will play 3 - 5 games, based on registration. Awards will be given to the 1<sup>st</sup> and 2<sup>nd</sup> place teams. Please contact Mike Burns at 920-451-8001 x118 or [mburns@sheboygancountyyymca.org](mailto:mburns@sheboygancountyyymca.org) with questions.

- All tournament games will be played at the Sheboygan YMCA on Friday, Saturday and Sunday.
- The tournament fee is \$140.00 per team.
- The registration deadline is November 1, 2017.

**The game format includes:**

- All games will be officiated, with one official per game.
- Games will be played in two 18-minute halves, with a 3-minute half time.
- All other rules, along with game times, will be emailed to the coaches.
- Rules are also available on our website at [www.sheboygancountyyymca.org](http://www.sheboygancountyyymca.org).
- Numbered shirts of the same color must be supplied by each team. Shin guards are required.



**SHEBOYGAN YMCA 2017 INDOOR SOCCER TOURNAMENT**

Please return to the Sheboygan YMCA, 812 Broughton Drive, Sheboygan, WI 53081

Team Name \_\_\_\_\_ Shirt Color \_\_\_\_\_

Coach \_\_\_\_\_ Address \_\_\_\_\_

Email \_\_\_\_\_ Phone 1 \_\_\_\_\_ Phone 2 \_\_\_\_\_

Assistant Coach \_\_\_\_\_ Address \_\_\_\_\_

Email \_\_\_\_\_ Phone 1 \_\_\_\_\_ Phone 2 \_\_\_\_\_

Scheduling Considerations \_\_\_\_\_

**PLEASE  CHECK THE BOX IF YOUTH IS A SELECT PLAYER**

Player Name	Grade		Player Name	Grade
1. _____	_____	<input type="checkbox"/>	7. _____	_____
2. _____	_____	<input type="checkbox"/>	8. _____	_____
3. _____	_____	<input type="checkbox"/>	9. _____	_____
4. _____	_____	<input type="checkbox"/>	10. _____	_____
5. _____	_____	<input type="checkbox"/>	11. _____	_____
6. _____	_____	<input type="checkbox"/>	12. _____	_____

**Hold Harmless Agreement**

I hereby agree to waive any claim or liability I may have on the YMCA arising out of use of the facility, and further agree that I will indemnify and save harmless the YMCA from any and all claims brought against the YMCA, its members and volunteers, on account of death, injury, or damage to persons or property received by any persons by reason of the acts or omissions of the users in their use. I also agree to waive any claims against the YMCA, its members and volunteers for injuries or damages that may result from the conduct of other persons, including participants in the program. I understand the above responsibilities and I give permission for my team to participate and be photographed in YMCA activities.

**Coach's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Team Fee**  
 \$140.00

**Girls Division 17F2-1YTOUR.**  
 U9/10 ..... Grades 3-4  
 U11/12 ..... Grades 5-6  
 U13/14 ..... Grades 7-8

**Coed Division 17F2-1YTOUR.**  
 U9/10 ..... Grades 3-4  
 U11/12 ..... Grades 5-6  
 U13/14 ..... Grades 7-8

**Payment**

Cash     Check     Credit Card # \_\_\_\_\_ Exp Date \_\_\_\_\_ 3 Digit Code \_\_\_\_\_

Receipt # \_\_\_\_\_ Amt Paid \_\_\_\_\_ Date \_\_\_\_\_ Staff \_\_\_\_\_