## The Champions Cup 18u/Gold (July 9-13, 2014) Wednesday through Sunday

Team Name:														
Team Manager:	<i>t:</i>				Primary Phone No.		Secondary Phone No. Secondary Phone No.		<u>Email</u>	··				
Coach Contact:		Primary Phone No.		<u>Email</u>	··									
(Please	(Please list in ascending uniform #)													
NOTES	Uniform #	Player Name	Positions	Grad. Yr.	Signed ?	GPA	/ SAT	Telephone	EMAIL					
									<u>+</u>					
				<u>+</u>		 			     					
				<b> </b>	 									
					 	 			i 					

Team Name:					
Team Manager:			Primary Phone No.		Email
Coach Contact:			Primary Phone No.		Email
GRADUATION HIGH SCHOOL YEAR		WRIST BAND / SHOE TOPPER <b>COLOR</b>	COLOR UNSIGNED	BLACK SIGNED	
EXAMPLE: 2015 (8)		LEAVE BLANK	6	2	
	-				
	-				
	-				

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