

LEAGUE NAME

## ANNUAL DISTRICT EOS CUP

## **U8-U14**

## PLEASE COMPLETE AND MAIL WITH ENTRY FEES BY NOVEMBER 1,2022 SHIRLEY THOMPSON, 1239 ADAM ST, TRACY CA 95376

LEAGUE COORDINATOR ADDRESS			-
ADDRESScell			
Email			
TEAM INFORMATION (GIVI	E THIS A	PPLICATION TO YOUR LEAGU	JE REPRESENTATIVE )
-	GE SENDER	COACH NAME/PHONE#'S	EMAIL ADDRESS
•	•	arate piece of paper. NO LATE 1	
		0.00 = Amount Due	
CHECKS MADE OUT TO DISTRICT		IFAB rules will be followed	
ALLOWED AT THE SITE. Sch	nedules w	acy Sports Complex & Legacy Fill be posted at least 72 hours price Saturday, and possibly consolation	or to event. Just tell you

on Sunday. **REMINDER**: This is a recreation tournament and will be the teams that are playing in







