



West Haven Invitational Tournament
In Support of Breast Cancer Awareness
2018
Columbus Day Weekend – October 6 & 7, 2018



PLEASE TYPE OR PRINT

Please CIRCLE the appropriate Age and Sex for your team:

Age:	U-15	Born on or After January 1, 2004	Boys /Girls	Comp/Rec
	U-12	Born on or After January 1, 2007	Boys /Girls	Comp/Rec
	U-11	Born on or After January 1, 2008	Boys /Girls	Comp
	U-10	Born on or After January 1, 2009	Boys /Girls	Rec

For Information email WHIT@WHYSL.ORG

Team Name: _____

Club Name: _____

City: _____ State: _____ Zip: _____

Team Color: Jersey _____ Shorts: _____ Alt. Uniform: _____

Contact Name: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Address: _____

E-mail: _____

Team History: (if available)

Divisional Level: _____

Recent Season Record: Won: _____ Lost: _____ Tied: _____

Recent Tournament Record: Won: _____ Lost: _____ Tied: _____

Name of Tournament: _____

Club Official or Coach Signature: _____

PLEASE REMEMBER:

- (1) Deadline is 9/27/2018
- (2) Enclose a check for \$375 for Competition divisions and \$300 for Recreational divisions.
- (3) Roster must be received before first game on 10/6/18.