



The 2007 Indigenous Soccer Cup
A Developmental Tournament of The Native American Soccer Project



Team Registration

Team Name: _____

Boys: U-14 U-16 U-19 (circle appropriate gender and age)
Girls: U-14 U-16 U-19

Team Contact Person: _____ **E-mail:** _____

Mailing Address: _____

City: _____ **State/Province/Territory:** _____

Country: _____ **Zip Code:** _____

Phone (evening): (_____) _____ - _____ **Phone (daytime):** (_____) _____ - _____

Team Head Coach: _____ **E-mail:** _____

Mailing Address: _____

City: _____ **State/Province/Territory:** _____

Country: _____ **Zip Code:** _____

Phone (evening): (_____) _____ - _____ **Phone (daytime):** (_____) _____ - _____

Team Assistant Coach: _____ **E-mail:** _____

Mailing Address: _____

City: _____ **State/Province/Territory:** _____

Phone (evening): (_____) _____ - _____ **Phone (daytime):** (_____) _____ - _____

Team Chaperone: _____ **E-mail:** _____

Mailing Address: _____

City: _____ **State/Province/Territory:** _____

Country: _____ **Zip Code:** _____

Phone (evening): (_____) _____ - _____ **Phone (daytime):** (_____) _____ - _____