**TEAM INFORMATION**

Team Name:

Team Registration Number (Mandatory):

League and Division Registered During 2019 Season:

Team Colours: Home - Away -

Affiliated Club Name: Phone Number:

Age Group: \_\_U13 \_\_U14 \_\_U15 \_\_U16 \_U17 \_\_U18 Gender: \_M \_F

Will you require a Travel Permit: YES \_\_ NO \_\_

(if your team is outside of the York Region Boundaries you WILL require a Travel Permit)

**TEAM OFFICIAL INFORMATION**

Coaches Name:

Address: : City : Province: Postal Code:

Home Phone: Work: Cell:

E-Mail Address:

Manager’s Name: Cell:

E-Mail Address:

**FOR OFFICE USE ONLY**

Method of Payment: CHQ #: CREDIT CARD AUTH.#: Amount Paid: $

Registration Fee: $575.00

Cheques payable to:

**Vaughan Soccer Club**

**P.O. BOX 852 11151 Keele Street**

**Maple, Ontario L6A 1S1**

[tournament@vaughansoccer.com](mailto:tournament@vaughansoccer.com)

905.832.0911

 