



West Haven Invitational Tournament
In Support of Breast Cancer Awareness
2011
Columbus Day Weekend – October 8 & 9, 2011



PLEASE TYPE OR PRINT

Please Circle the appropriate age and Sex for your team:

Boys / Girls

Age: U-14 Born on or After August 1, 1997 U-12 Born on or After August 1, 1999
 U-11 Born on or After August 1, 2000 U-10 Born on or After August 1, 2001

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: (see below)

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 9/22/2011
- (2) Enclose a check for \$375 for U11 through U14 divisions and \$300 for U10 age group.
- (3) Include roster.