

RAYTOWN SOCCER CLUB

Proudly Presents

2018 Kansas City Cup

April 20th-22nd, 2018

Please select GENDER: : MALE / FEMALE

(A level teams will be given priority for Acceptance- B levels brackets will be determined by field availability)

Please select: GOLD OR SILVER

AGE(circle one): Under 8(4V4) 9(7V7) 10(7V7) 11(9V9) 12(9V9) 13 14 15 16 17 18 19

Prices: U8 =\$270 U9/ U10 =\$410 U11/ U12= \$470 U13-U15=\$550 U16 and up=\$570

Application Must be filled out completely or it will be returned

Team Name _____ USYSA State Association _____

City _____ State _____

Coaches Name _____ Email Address _____

Coaches Address _____ Phone () _____

City/State/Zip _____ Cell () _____

Manager _____ Email _____

Phone () _____ Cell () _____ Fax () _____

Manager Address _____

Recent Tournaments _____ Street _____ City _____ State _____ Zip _____
Division Played _____ Record W _____ L _____ T _____ Placed _____

Recent Tournaments _____ Division Played _____ Record W _____ L _____ T _____ Placed _____

League you play in and division _____ Fall League Record: W _____ L _____ T _____ 1st _____ 2nd _____

Team /Coach conflict or request _____

There is no guarantee of placement. Kansas City Metro teams may be scheduled for Friday night. Out of town teams may be scheduled for games early Saturday morning. The Directors will not schedule around league play. The Directors reserve the right to refuse any team at any time.

ENTRY DEADLINE: March 16, 2018

Full Payment must be attached to application

Applications received after the deadline will be assessed a \$25 Fee**

****Teams withdrawing 5 days after the deadline will forfeit entry fee****

Make check payable to:

RAYTOWN SOCCER CLUB: 6124 Blue Ridge Blvd, Suite 117, Raytown, Missouri 64133

Phone: (816) 313-7721 Fax: (816) 313-0729 (please contact office to verify receipt) E-mail: managerraytownsc@comcast.net

We accept MasterCard Visa, Discover and AMEX Credit Cards will be charged a 3% Convenience Fee for tournament fees

Credit Card Holder _____ Credit Card # _____

3-digit security code (from back of card) _____ Expiration Date _____

PRICE WITH CHARGE CARD: U8 \$278.10 U9 /10 \$422.30 U11/12 \$484.10 U13-U15= \$566.50 U16 and up \$587.10