



COST: \$200.00

Money Order Payable to: SCYSO

Date: MAY 28 & 29, 2011

Location: Whittier Narrows, El Monte, CA

Deadline: MAY 16, 2011

League Name: \_\_\_\_\_ League President \_\_\_\_\_

Team Name \_\_\_\_\_ Division \_\_\_\_\_ Boys \_\_\_\_\_ Girls \_\_\_\_\_

Coach's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_ Alt # \_\_\_\_\_

Address: \_\_\_\_\_ Apt # \_\_\_\_\_ City: \_\_\_\_\_ Zip Code \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

Liability Waiver: I/we, the undersigned representative(s) of this participating team requests SCYSO to accept this team registration and permit this team's participation in the SCYSO Youth Tournament. I/we hereby release, identify, and hold harmless to SCYSO and its Board of Directors, Members, Officials, Tournament Sponsors, Coaches, Referees, and all other representatives of this organization from any claim arising out of his competition including tournament scheduling, monetary, physical or emotional injury to the team participants. Further we recognize and acknowledge that adverse weather is an act of God and we will accept all decisions regarding play ability of facilities (and therefore the outcome of competition) by the tournament committee as final, without objections or appeal. There will be no refund compensation for lost games due to weather or forfeitures, or acts of God. I/we as the representative(s) of this team certified that each player registered to participate in the tournament is covered by an approved medical insurance plan as required by SCYSO.

\_\_\_\_\_  
(Print coach name) (Signature) (Date)

Requirements:

- Original Birth Certificate.
- School ID or anything to prove age with a picture and birthday (recent).
- Must have league credentials to play with. In case of a borrowed player or a team that is not registered in a league players may participate with a school ID, Drivers license, California ID etc.
- Any false documents will result in a fine \$.
- Must play all games or you will be fined \$ and disqualified from the tournament.
- Must pay \$250.00 up front before deadline to guarantee your spot.
- No PERSONAL checks will be accepted

Please fill out and send to: 500 E. Carson Plaza Dr., Suite 204, Carson, CA 90746

You can also fax in your Registration form to 310-515-6386

Any questions please call 310-515-6344