



2009 Hemby Cup
National Squirt Tournament
Charlotte, NC



Registration Form

League Name: _____

League Website: _____ Team Level: AAA AA A B Select

2009-2010 Season Record: _____ Goals for: _____ Goals against: _____

Team Name: _____

Team Website: _____

Team Manager: _____

Email: _____

Daytime Phone: _____ Evening Phone: _____ Cell Phone: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Team Representative's Signature: _____

Method of Payment: Visa MasterCard Check Enclosed

Credit Card # _____ Exp. Date: _____

Signature: _____

