

Sacramento Adult Soccer League

Gold Cup

Team Registration Form

June 6 & 7, 2009

at

Cosumnes River College, Sacramento

Select Division: ☐ Men's Open Division (18 & Over)
☐ Men's 30 & Over Division
☐ Men's 40 & Over Division

Team Name: _____

Colors: (Jersey) _____ (Shorts) _____

Home League: _____

Contact: _____

Phone: _____ email: _____

Address: _____

City: _____ State: _____ ZIP: _____

Alternate Contact: _____

Phone: _____ email: _____

Fee: \$500 by April 15, 2009 or until the tournament is filled. Unfortunately, we had to turn teams away last year due to all slots being filled so respond early. Make the check out to SASL and attach to this entry form. Do not send cash.

Send registration form and fees to:

Sacramento Adult Soccer League

Attn: Will Williams, 2008 Gold Cup Director

P.O. Box 660125

Sacramento, California 95866-0125

For additional information please contact:

Will Williams at **916-541-1835** or at **will62russ@sbcglobal.net**

or visit our web site at www.saslsoccer.org



S.A.S.L.