



AYSO Section 1
21st Annual
Mike Murphy Memorial VIP Tournament

Section: _____ Area: _____ Region: _____ City: _____

Team name: _____

Team Colors - Shirt: _____ Shorts: _____ Socks: _____

Team Contact Name: _____ Title: _____

Cell Phone: _____ Other Phone: _____

Email: _____

Address: _____ City: _____ State: _____ Zip: _____

Coach: _____ Day Phone: _____ Eve Phone: _____

Asst. Coach I: _____ Day Phone: _____ Eve Phone: _____

For shirt sizes please indicate Youth (Y) or Adult (A) in S, M, L, XL, etc. For example – YXL, AS

Coach Shirts: Size _____ Size _____

#	Player ID#	Player Name	Telephone	Date of Birth	Shirt Size
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					

The team roster must be signed by the Regional Commissioner or designee.

Regional Commissioner _____ Print name _____ Signature _____ Date _____ Phone _____

Mail with \$50 fee and Referee Info Form to Section One VIP Tournament, 14717 Velvet Street, Chino Hills, CA 91709