

Blue Chip Classics Cup

Team Registration Form

Age Group:

Club/ Team Name:

Coach Name:

Coach Cell Phone:

Team Contact/ Mgr Name:

Team Contact/ Mgr Cell Phone:

Team Hotel Name:

• Please include the following in your registration packet:

“Copy” of your complete Roster (validated by your state) for our files

“Copy” of your Guest Roster for our files

“Copy” of your Travel Permit (all teams outside OSYSA and US Club Soccer) for our files

Validated Players’ and Coaches’ Cards (must match roster and guest roster) – we will review and return

“Original” Indemnity Form signed by every player and every parent of a player under age 18 for our file

Medical Authorizations (must be one for every player on the rosters) – we will review and return

NOTE THAT YOU MUST HAVE PLAYER CARDS, ROSTERS AND MEDICAL RELEASE FORMS AVAILABLE AT EVERY GAME