

**APPLICATION DEADLINE**  
**MARCH 9, 2012 8:00PM**



Javanon Cup April 21 & 22, 2012

Please mail this completed Application, Current Roster & fees (payable to the Javanon Soccer Club) to:  
**Javanon Cup 2012**  
**12411 Rehl Road**  
**Louisville, KY 40299**

**TEAM INFORMATION**

**Team Name and Return Address:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Age Group: U-**      **9**      **10**      **11**      **12**  
**(Circle One)**      **13**      **14**      **15**      **16**

**Tournament Fees:**      U9 & U10 - 6vs6 - \$450.  
U11 & U12 - 8vs8 - \$475. / U12, U13, U14, U15, U16 - 11vs11 - \$525.

**Team / Club Website:**

**League Name:**

**State Organization:**

**Division**  
**(Circle One)**      Premier      Elite      Select

**Gender:**      M      F      **(Circle One)**

**Are you willing to play up a division?**      Y      N  
**(Circle One)**

**Team Coach:**

**Phone:**

**Email:**

**Team Manager:**

**Phone:**

**Email:**

**Additional Pertinent Information**

**Housing Policy**

Teams must reserve hotel accommodations through the Tournament.  
Hotel selection and registration links will be available on the tournament website after January 15, 2012.

**Tournament Policies**

Please read the Rules and Regulations as posted on the website. By signing below you are agreeing that you have read, understand and agree to abide by the tournament's policies, rules and conditions.

**Waiver of Liability**

As the representative of the team completing this application to participate in the 2012 Javanon Cup, I do hereby discharge, waive and release Javanon Soccer Club and all sponsors, officials, referees and representatives from any claim arising from an injury to a duly registered player, coach or official of this team & hereby certify that each player, coach & official is covered by approved medical insurance as is required by YSSA. This team agrees to accept the decisions of the Tournament Director as to the playability & therefore the outcome of the tournament due to adverse weather conditions or other unforeseen circumstances without any appeals, objections or compensation whatsoever.

\*Applications will only be accepted if completed with current roster and fee attached. Thank you.

Signature of Coach: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Signature of Manager: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

**Official Use Only**

Date Received \_\_\_\_\_ Check# \_\_\_\_\_ Accepted Y N  
Roster Y N Guest Players Y N # \_\_\_\_\_  
Acceptance letter mailed Y N Emailed Y N Date: \_\_\_\_\_





