

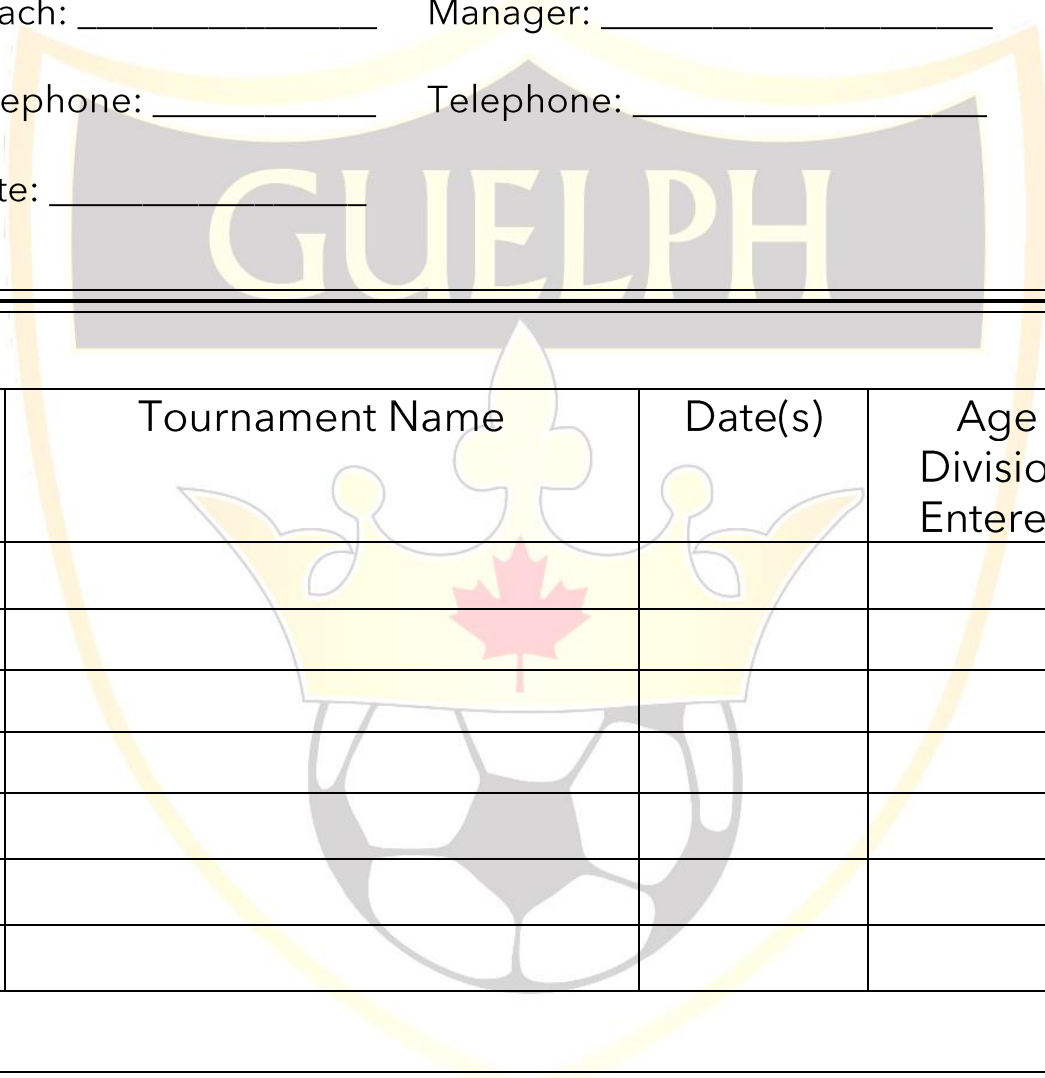
Guelph Soccer Rep Festival/Tournament Authorization Form

Team: _____ Gender/Age Division: _____

Coach: _____ Manager: _____

Telephone: _____ Telephone: _____

Date: _____



	Tournament Name	Date(s)	Age Division Entered
1			
2			
3			
4			
5			
6			
7			

Club Approval Name and Signature:
