CROSS-OVER LEAGUE REGISTRATION FORM
FALL 2011

Please complete and e-mail completed form to michaelscobee@aol.com

ENTRY FEE: $125 per team payable to VSA, mail payment to:
Cross-over Commissioner Scobee
8874 Tenbury Ct.
Bristow, VA 20136

Team Name:	
Soccer Organization:	
Coach's Name:	
Coach's Street Address:	
Coach's City, State, Zip:	
Coach's Phone:	
Coach's E-mail:	

☐ **Boys Team** ☐ **Girls Team**

Player's First Name	Player's Last Name	Player's Birthdate