



Welcome to the biannual GFA Grassroots 3V3 Football Tournament. This is a chance for youth players and their families to come together in an exciting, energetic and family oriented football tournament. We appreciate your participation and hope you will find that this tournament is full of fast-paced play, intended to continue Guam's growth as a football powerhouse! Most importantly, we want your children to learn first-hand how much fun football can be! Please be sure you have reviewed the tournament rules!

FIRST COME, FIRST SERVED:
LIMITED TO FIRST 20 TEAMS PER AGE DIVISION
DEADLINE TO REGISTER: 1 December

<p>Team Name _____</p> <p>Coach/Rep _____</p> <p>Coach Email _____</p> <p>Phone No. _____</p>	<p>Tournament Fee per team: \$25</p> <p>Only six players may be registered to play per team. All players must have a valid GFA ID card Indicate age category by checking one box below.</p> <p>Division <input type="checkbox"/> U8 <input type="checkbox"/> U10 <input type="checkbox"/> U12</p>
<p>Player 1</p> <p>Name _____</p> <p>Birthdate _____</p> <p>GFA ID No. _____</p>	<p>Player 2</p> <p>Name _____</p> <p>Birthdate _____</p> <p>GFA ID No. _____</p>
<p>Player 3</p> <p>Name _____</p> <p>Birthdate _____</p> <p>GFA ID No. _____</p>	<p>Player 4</p> <p>Name _____</p> <p>Birthdate _____</p> <p>GFA ID No. _____</p>
<p>Player 5</p> <p>Name _____</p> <p>Birthdate _____</p> <p>GFA ID No. _____</p>	<p>Player 6</p> <p>Name _____</p> <p>Birthdate _____</p> <p>GFA ID No. _____</p>

For Office Use Only		Received By _____
Team No _____	Age Division _____	Date Received _____
Payment Method _____		Amount Paid _____
Check No. (if applicable) _____		Order No. _____