

## **FUTSAL TEAM APPLICATION**

<u>Session:</u>								
Fall	Winter – Session I			Winter – S	Session II	Spring	Summer	
Adult:	Men			Women		Co-Ed		
<u>Youth</u> Gender:								
	Boys			Girls				
Age Group:								
u9	u10	u11	u12	u13	u14	HS JV	HS Varsity	
Division:	Division I				Division II			
Team Info.								
Team Name:					Team Color:			
Team Contact:								
Primary Contact #:				Second	_ Secondary Contact #:			
Primary Email	Address:							
Secondary Em	ail Addres	55:						
•	• E VISIT <u>W\</u> YOU M •	ALL GAMES LOCA <u>WW.MIKEEIN</u> AY FAX (502- ALL TEAM	S WILL BE F ATED AT 30 <u>MERSTRAIN</u> -459-8069 <u>MCF</u> FEES ARE F	PLAYED AT TH 001 STOBER A <u>NINGFACILITY</u> ) OR EMAIL YO RAIG@LOUISY DUE PRIOR TO	IE MIKE EIMER VE., LOUISVILI . <u>COM</u> FOR MC OUR COMPLET /ILLESOCCER.C ) THE START O	RE DETAILS ON ED REGISTRATIO COM F YOUR FIRST GA	CILITY OUR FUTSAL LEAGUES. DN FORMS TO	

## WWW.MIKEEIMERSTRAININGFACILITY.COM

502-479-3344