



# UNITED STATES ADULT SOCCER ASSOCIATION. INC.

## National Cups Entry Form 2010

**THIS FORM MUST BE TYPED AND ALL SPACES COMPLETED.**

Check One

### ENTRY FEE

**Nat Fee / with Reg III Fee**

- |  |        |       |   |
|--|--------|-------|---|
| <input type="checkbox"/> US National Men's Amateur Cup | \$ 200 | \$225 | <i>Men Amateur Status players only</i>                |
| <input type="checkbox"/> US National Women's Cup       | \$ 200 | \$225 | <i>Open to Women Pro &amp; Amateur status players</i> |
| <input type="checkbox"/> US National Men's Over 30 Cup | \$ 200 | \$225 |   |
| <input type="checkbox"/> US National Men's U- 23 Cup   | \$ 200 | \$225 |   |
| <input type="checkbox"/> US National Women's U- 23 Cup | \$ 200 | \$225 |   |
| <input type="checkbox"/> US National Men's Open Cup    | \$ 250 | \$275 | <i>Qualifies Teams for the US Open Cup</i>            |

**Full Name of Team Entering:** \_\_\_\_\_

**State, Regional or National League Affiliation:** \_\_\_\_\_

<b>Primary Uniform:</b>	Shirts _____	Shorts _____	Socks _____
<b>Alternate Uniform:</b>	Shirts _____	Shorts _____	Socks _____

**Team Manager:** \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

City: \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_

State/Zip: \_\_\_\_\_ **E-Mail:** \_\_\_\_\_

**Team Coach:** \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

City: \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_

State/Zip \_\_\_\_\_ **E-Mail:** \_\_\_\_\_

**NOTE: Check with your State Association and Region for additional fees. All additional state association fees must be approved by the regional commissioner.**

1. **NO TEAM** will be allowed to compete at **ANY LEVEL** until this form (and the fee) has been received by the **National State Association Cup Commissioner and the Regional Cup Commissioner.**
2. Only State Association, National League or Regional League checks will be accepted for cup entries, payable to USASA. Club and team checks will NOT be accepted. A team may enter more than one competition if it meets the criteria. One form required for each entry.
3. A \$500 bond is required from all state winners within one week of being declared the State Champion. Only State Association checks, Money Order, or Cashiers Checks will be accepted, made payable to the USASA. **A return address must accompany that check.**
4. All decisions of the National Cup Committee are final and binding.

I have read and understand the USASA National Cups Policies. I am entering the team named on this entry form with the full understanding that all games in these competitions will be governed by the USASA National Cup Policies, the Constitution and Rules of the USASA, the USSF, and The Laws of the Game as published by FIFA.

Printed Name of Applicant \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Return this Form and all fees to: \_\_\_\_\_

Date Entry Form Received: \_\_\_\_\_ Time: \_\_\_\_\_