

Pepperell Fall Classic "Off-Line" Registration Form

1. Team Name : _____

2. Gender/Age Group (i.e. BU12): _____

3. Group A or B : _____

("A" is typically strong town travel teams. "B" is weaker town travel or rec teams.)

4. For U10 and below, 3-game or 5-game group: _____

(5-game group will return on Monday for at least 2 games)

5. League your team plays in: _____

6. Division your team plays in: _____

7. Comments about strength of team

(required to ensure proper placement in the tournament)

Coach Name: _____

Address: _____

Email address: _____

Day Phone: _____

Evening Phone: _____

This is a **patch tournament**. Please bring enough patches to hand out at least 12 per game. All recreational (U10 and below) and the top 3 finishers in competitive groups will receive awards. Out of State teams need permission to travel form from their state organization.

Please return this form, roster stamped by league registrar, and "Permission to Travel" form (if necessary), along with a check for \$250 per team made out to Pepperell Fall Classic to:

Stacey Drahusz
8 Merrimac Drive
Pepperell, MA 01463

Please enclose a check to ensure entry into the tournament.

Thank you.