

Afrim's Sports 2017 Presidents' Day Cup

Featuring

Turf Fields - 105ft x 150ft

Watching your child play from our new stadium seats!

Exciting games with great competition and 2 levels of play!

Big Screen TVs, Free Wifi and Concession Stand on site!



Tournament Format

Fields- non-boarded with field turf 105ft x 150ft

Registration- In order to register please fill out and return the registration form with a \$100 deposit to hold your spot in the tournament

Fees- Each team is guaranteed 4 games minimum, Team Fee \$350 (\$250 U8s), Full payment is due before the 1st game

Rosters- All teams must submit a roster prior to the start of their first game and each player MUST sign the Afrim's Sports waiver before they play, NO ROSTER MAX SIZE

Awards- will be given to both the Tournament Champions as well as the Tournament Finalists

Please Return Registration Form To:

Afrim's Sports Tournament Director

636 Albany Shaker Rd.

Albany, NY 12211

Fax: (518) 438-4422

Phone: (518) 438-3131

afrimsports@gmail.com

Friday, February 17, 2017

Age Group	Format	Approx. Start Time
Mens A	6v6	evening
Mens B	6v6	evening

Saturday, February 18, 2017

Age Group	Format	Approx. Start Time
U8 Mixed	4v4 *dual sided* \$250/team	morning/mid-morning
U10 Boys	7v7	mid-morning
U10 Girls	7v7	morning
U12 Boys	7v7	mid-afternoon
U12 Girls	7v7	afternoon
Co-ed A	6v6	evening
Co-ed B	6v6	evening

Sunday, February 19, 2017

Age Group	Format	Approx. Start Time
U14 Boys	6v6	afternoon
U14 Girls	6v6	morning
U16/17 Boys	6v6	late afternoon
U16/17 Girls	6v6	afternoon
Womens A	6v6	evening
Womens B	6v6	evening



Can't make this tournament?

Check out our website for our complete listing of tournaments offered!

www.afrimsports.com/tournaments



Presidents' Cup 2017 Registration Form

Team Name: _____ Age: _____
 Level (A or B): _____ Gender (Circle): Boys _____ Girls _____
 Manager/Coach: _____
 Manager/Coach E-mail: _____
 Day Phone: _____
 Evening Phone: _____
 Cell Phone: _____

Credit Card: (only if paying with credit card)

Please Circle: \$100 Deposit _____ \$350 Full Fee _____
 Visa _____
 Please Check One: Mastercard _____
 Discover _____
 Card #: _____
 Exp. _____ CVC Code: _____
 Card Holder: _____

Make Checks Payable to: AFRIMS SPORTS