7th INDEPENDENCE CUP TOURNAMENT

PORT CHESTER SOCCER CLUB INC

222 Grace Church St. Room 100, Port Chester, New York 10573

LINE UP / ALINEACION

CLUB'S NAME(Nombre del Club):_____

TEAM'S NAME (Nombre del equipo):_____ DIVISION (BU11 o BU13): _____

TEAM COLORS(Colores del Equipo):_____

SHIRT#	PLAYER'S NAME (Last name first)	DOB(March 8, 1998)	COMMENTS
No de camisa	Nombre del Jugador(Apellido paterno primero)	Fecha de Nacimiento	Comentarios

COACH'S NAME(Nombre del Tecnico o Entrenador):_____

I acknowledge that I assume the risk for any personal injury I sustain before, during or after the game and / or practice and I will not hold liable the Port Chester Soccer Club Inc. The Village of Port Chester, State Association, ENYSASA, U.S. Amateur Soccer Association or U.S Soccer Federation