

AYSO National Open Cup 2017

Region Response Form



Please complete this form and mail in with a copy of your team roster and regional or club check to:

AYSO National Office - National Open Cup 2017
19750 S. Vermont Ave. Suite 200
Torrance, CA 90502

Registration Fees: (please circle)

Core: U10 - \$695 U12 - \$745 U14 - \$795 U16 - \$795 U19 - \$795

EXTRA: U10 - \$695 U11 - \$745 U12 - \$745 U13 - \$795 U14 - \$795

AYSO Club: U10 - \$695 U11 - \$745 U12 - \$745 U13 - \$795 U14 + - \$795

Division: Boys Girls Coed

The following information is required. Please print legibly.

Region #: _____

Regional Commissioner Name: _____

City / State / Zip: _____

Home Phone: _____ Cell Phone: _____

E-Mail Address: _____

Signature: _____

For National Office Use Only:

Received Date: _____ Check Date: _____ Check #: _____

Confirm Regional Check: _____ Amount: _____ Receipt Acknowledged: _____