

# 2008 GLEN ELLYN SUMMER CLASSIC

Age Group: (check one)

10 & under \_\_\_\_\_  
July 10 -13

11 & under \_\_\_\_\_  
July 17 - 20

12 & under \_\_\_\_\_  
July 24 - 27

## TEAM INFORMATION

Team Name: \_\_\_\_\_

Team Colors: Jersey \_\_\_\_\_ Pants \_\_\_\_\_

Sponsored By: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

## TEAM MANAGER INFORMATION

Team Manager: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_

Cell Phone: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

## **TOURNAMENT FEE: \$400.00**

**If paying by check, make payable to: GLEN ELLYN PARK DISTRICT**

Check One: VISA \_\_\_\_\_ MasterCard \_\_\_\_\_ Check \_\_\_\_\_

Credit Card Number:     -     -     -

Card Expires (include month & year)   -   Amount: \_\_\_\_\_

Signature of Card Holder: \_\_\_\_\_ Date: \_\_\_\_\_

## **Mail payment & completed application form to:**

**(Faxes will not be accepted)**

Glen Ellyn Park District

Attn: Dan Kroger

185 Spring Avenue

Glen Ellyn, IL 60137