Greater Portland Soccer District, Inc.

Affiliated with: Oregon Adult Soccer Association (OASA); United States Soccer Federation (USSF); United States Amateur Soccer Association (USASA); Federation Internationale de Football Association (FIFA)

GPSD, Inc.
P.O. BOX 271
Otis Or. 97368

Application for Team Registration – Spring 2010

1. Team Name: _____

(The "Team") hereby applies to register as an amateur soccer team with Greater Portland Soccer District, Inc. (GPSD, Inc.). The Team's preference is to play in (check one):

April 10 2010 thru July 25 2010

Open	Over 30	Over 40	Over 50
Premier. ($1450.00)	1st Div. ($1125.00)	1st Div. ($1100.00)	1st Div. ($825.00)
1st Div. ($1125.00)	2nd Div. ($825.00)	2nd Div. ($825.00)	
2nd Div. ($1100.00)			
3rd Div. ($1075.00)			
4th Div. ($825.00)			

Games will be played on Tuesday, Wednesday, Saturdays and Sundays

2. Registration is due before the managers meeting on 2/22/2010. The managers meeting will be held at Kell's Irish Pub 112 S.W. 2nd Portland Oregon Starting at 7:00pm . Late registration is due by 2/27/2010 along with a $100.00 late fee. Make your checks payable to the Greater Portland Soccer District, Inc. and mail to the address shown above or pay online at Paypal.com and send payment to gpsdcard@aol.com.

3. The Team understands that GPSD, Inc., OASA, USASA, USSF and FIFA all have rules that are applicable to the Team. The Team agrees to abide by all of these rules.

4. The Team understands that it is only permitted to use players who are registered with and hold a current, valid identification card issued by OASA.

5. The Team understands that it will be held responsible for the actions of its players, coaches, manager and fans.

6. The undersigned manager is signing on behalf of the Team. GPSD must be notified in writing if the Team selects a new manager.

Team Manager's Signature ___ _____ Date _____

Team Manager's name printed _____ Home Phone

Mailing Address _____ Work Phone _____

_____ Cell Phone _____

E-mail _____

Alternate person to contact _____

Home Phone _____ Work Phone _____ Cell Phone _____

Uniform Colors: Shirts ____Blue _____ Shorts __ _____

Team Name last season if different _____ _____

Home field you can provide to GPSD, Inc. (if any) _____

(If proof of use not attached – no games will be scheduled)

Check if this is your first season as a team manager with GPSD, Inc. (___)

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OFFICE USE ONLY Date _____ Team Fee $_____

Late Fee $_____ Deposit Code _____

Total $_____