



Team Registration Form 2013

What: The 7th Annual Deaf Indoor Soccer Amistad Tournament
When: Friday November 8 & Saturday, November 9, 2013
Who: 6 - 8 Men's Teams / 3 – 4 Women's Team
Where: Soccerdome, 7330 Montevideo Road, Jessup, MD 20794.
www.soccerdome.com

Date: _____ Team Name: _____ In What State: (please write) _____

Team Contact Name & Title: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

E-mail _____ Videophone Number: _____ Pager Number: _____

Team uniform primary color: _____ Team uniform alternate color: _____

Payment Deadline due (check one)

\$ 450 September 15th \$ 500 October 15th \$ 600 November 1st

Please fill out on the team registration form and add check or money order made payable to:

LDHHAMDC
P.O. Box 91515
Washington, DC 20090

If you are unable to make a payment in full before any of the deadline due. Please contact us ASAP so we can help and make an agreement. Avoid paying late fee.
Just contact us at futbol@ldhhamdc.org

For more information or question, please feel free to contact us at futbol@ldhhamdc.org .
If you want to set up a VP meeting, just e-mail us in order to make a time and date.

www.ldhhamdc.org/futbol