



Tracy Whitney Jamboree

U9 – U10: September 24 & 25

U6 – U8: October 1 & 2

Federal Way Mod Soccer Club (FWMSC) would like to invite all U6 thru U10 Teams to the 2011 Tracy Whitney Jamboree, which will be held at Saghahie Middle School. This is a jamboree and the Fall 2011 WSYSA “Small-Sided Soccer Program” rules apply.

Each team is guaranteed at least three (3) games except for U6 who will be playing two (2) games. U7 – U10 will play two (2) Saturday games and one (1) Sunday game unless other arrangements are negotiated prior to scheduling. U6 teams will be offered one (1) Saturday and one (1) Sunday game OR two (2) Saturday games, their choice.

For teams outside of Federal Way, we can schedule your Tracy Whitney games around your league game as long as we know that league game time before the schedules are completed. Scheduling 1 Saturday and 2 Sunday Tracy Whitney games often works well.

Each team is allowed only three (3) guest players as long as they do not exceed their maximum roster size as defined for their age group. Schedules will be mailed approximately 7 days prior to the jamboree. Up to date information including rules and schedules (when available) may be found at <http://www.federalwaysoccer.com/tournaments-tracywhitney.htm>.

Send your completed application form with check or money order made payable to FWMSC to the address shown below. If you have any questions, please contact Sharon Woodford at pwoodford@jps.net or 253-941-0638. Applications without payment will not be considered.

FWMSC
(Tracy Whitney Jamboree)
PO Box 3417
Kent, WA 98089

	Entry Fee	
Age U6	\$40.00	Age U9: \$135.00
Age U7	\$85.00	Age U10: \$150.00
Age U8	\$120.00	

Application Deadline:

U9 - U10: September 1, 2011

U6 – U8: September 11, 2011

Return this portion with remittance

Jamboree Application

Team Name: _____ Team Age: U-____ Male ____ Female ____

For Bracketing Purposes, Do You Consider Your Team: Strong: ____ Medium: ____ Weak: ____

If you are a U6 Team, would you prefer: 2 Saturday Games: ____ OR 1 Saturday & 1 Sunday Game: ____

Do you have any scheduling requests? _____
Example: Coaching more than one team (list other team name) or league game to schedule around (give time of game if known)

Coach’s Name: _____ Phone #'s (h) _____ (c) _____

Team Contact: _____ Phone #'s (h) _____ (c) _____

Address: _____ City: _____ State: ____ Zip: _____

E-Mail Address: _____ Club: _____

I certify this application is accurate and complete: _____

Signature of Coach or Manager

FWMSC Use Only: Paid By: CK: ____ MO: ____ # _____ Date: _____