

**Virginia Soccer Festival  
Recreational  
Tournament  
June 12-13, 2010**



**EMERGENCY TEAM CONTACT FORM**

Please note, the person listed below will be the primary contact for your team during the 2010 Virginia Soccer Festival. This person will be contacted by Tournament Officials in case of any emergency, problems, changes, rain-outs and/or any other situations that may involve your team.

TEAM NAME : \_\_\_\_\_

AGE DIVISION: U- \_\_\_\_\_

TEAM CONTACT: \_\_\_\_\_

HOTEL NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_

CELL PHONE: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

HOTEL PHONE: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

GUEST ROOM NUMBER: \_\_\_\_\_

**\*\*\* THIS FORM MUST BE SUBMITTED AT \*\*\*  
TEAM REGISTRATION AND CHECK-IN ON Friday, June 11, 2010.**