



Soccer Association for Youth
Application to Participate
In Non-SAY Events



SAY Affiliate Information

Please type or print clearly

SAY Area/District Name _____

Team Name (If Applicable) _____

Coaches Name _____ Phone _____

Coaches Address _____

City _____ ST _____ Zip _____

E-Mail _____

Age Group _____

Coach's or Area President's Signature _____

Tournament or Event Information

Event Name _____

Event Address _____

City _____ ST _____ Zip _____

Event Contact Person _____ Event Contact Phone _____

Event E-Mail _____ Event Website _____

For Office Use Only

Approved By _____

Position _____ Date _____

**** ROSTERS MUST ACCOMPANY THIS FORM ****

Disclaimer:

In granting this permission to participate, neither SAY nor its affiliate shall be liable for lodging, transportation or injury to persons or property sustained OUTSIDE of the actual playing and/or practicing in the approved event. Please submit form to SAY National Office at One North Commerce Park Drive, Suite 306-320, Cincinnati, OH 45215