

2010 NEAAU INAUGURAL LACROSSE CLASSIC

ENTRY FORM



<u>AGE</u>	<u>DATE</u>	<u>DEADLINE</u>	<u>LOCATION</u>
13U	August 14, 2010	July 30, 2010	Northboro, MA

Team Name. _____ *Club Number* _____

COACHES INFORMATION

NAME OF HEAD COACH: _____

ADDRESS: _____ *AAU MEMBERSHIP#* _____

CITY _____ *STATE* _____ *ZIP CODE* _____

HOME PHONE # _____ *WORK PHONE #* _____ *MOBILE PHONE #* _____

EMAIL ADDRESS _____ *PAGER #* _____

NAME OF ASSISTANT COACH/CONTACT PERSON: _____

ADDRESS: _____

CITY _____ *STATE.* _____ *ZIP CODE.* _____

HOME PHONE # _____ *WORK PHONE #* _____ *MOBILE PHONE #* _____

EMAIL ADDRESS _____ *PAGER #* _____

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