UNITED STATES ADULT SOCCER ASSOCIATION

Member of the Amateur Council of the USSF

7000 S. Harlem Avenue Bridgeview, IL 60455

National Cups Entry Form 2020-2021

Check One	MEN	Deadline by 5 PM	ENTRY FEE
☐	EPSA Open Cup	9/23/20	$250
☐	Robert M. O'Neill Amateur	9/23/20	$150
☐	Norman S. Inazu Over 30 Cup	2/4/21	$150

		Deadline by 5 PM	ENTRY FEE
☐	Men's Over-40	2/4/21	$150.00

1. Please **PRINT** or **TYPE** all information **legibly!** Illegible forms will be rejected.
2. **CASH, MONEY ORDERS, CERTIFIED CHECKS ONLY payable to EASTERN PENNSYLVANIA SOCCER ASSOCIATION (EPSA**)
3. A team may enter more than one competition if it meets the criteria. Use one form per entry.
4. All decisions of the State Cup Commissioner and National Cup Committee are final and binding.
5. **Any applicants not meeting all of the above criteria and deadlines will be disqualified.**

We would be interested in hosting the Cup Draw Party, to take place within 7 days from deadline. ◉ Yes ○ No

FULL NAME OF TEAM ENTERING: _____

STATE ASSOCIATION AFFILIATION: Eastern Pennsylvania Soccer Association (EPSA)

LEAGUE AFFILIATION: _____

PRIMARY UNIFORM: Shirts _____ Shorts _____ Socks _____

ALTERNATE UNIFORM: Shirts _____ Shorts _____ Socks _____ I have read and understand the USASA National Cup Policies at www.usasa.com. I am entering the team named in this Entry Form with the full understanding that all games in these competitions will be governed by the National Cups Policies, the Constitution and Rules of the EPSA, the USASA, the USSF, and The Laws of the Game as published by FIFA.

Home Field Address: _____

Team Manager: _____ Home Phone: (_____)_____

Address: _____ Home Fax: (_____)_____

City: _____ Cell Phone: (_____)_____

State/Zip: _____ E-Mail: _____

Team Coach: _____ Home Phone: (_____)_____

Address: _____ Home Fax: (_____)_____

City: _____ Cell Phone: (_____)_____

State/Zip: _____ E-Mail: _____

Printed Name of Applicant Signature Date

Return to: Eastern Pennsylvania Soccer Association
4070 Butler Pike, Suite 100
Plymouth Meeting, PA 19462 e-mail: eastpasoccer@gmail.com

Date Pd _____
M/O #_____
Amount:_____