



**CENTRAL ARKANSAS 6V6 INDOOR  
KICKOFF CLASSIC 2018  
U8-U19 BOYS AND GIRLS**

**AUGUST 3-5**

**REGISTRATION DEADLINE – JUL 27<sup>TH</sup>**

**COST: \$350 PER TEAM**

**SUMMER I AND II LEAGUE WINNERS  
RECEIVED FREE ENTRY INTO TOURNAMENT**

**ONLY ONE REGISTRATION FORM NEEDED PER TEAM!!**

**Coach/Team Information**

**Please print firmly and legibly to make clear copies**

**Last Name \_\_\_\_\_ First Name \_\_\_\_\_**

**Contact Phone # (\_\_\_\_\_) \_\_\_\_\_ Email address \_\_\_\_\_**

**Team's Age Division U\_\_\_\_(Boys/Girls) Coach's Name \_\_\_\_\_**

**Team Name \_\_\_\_\_**

**-Registration cost-\$350**

**-25 minute games—No halftime**

**-A minimum of 3 games**

**-No offside**

**-Live play off the walls**

**-A maximum of 12 players per team**

**ROSTER**

1. \_\_\_\_\_ 7. \_\_\_\_\_  
2. \_\_\_\_\_ 8. \_\_\_\_\_  
3. \_\_\_\_\_ 9. \_\_\_\_\_  
4. \_\_\_\_\_ 10. \_\_\_\_\_  
5. \_\_\_\_\_ 11. \_\_\_\_\_  
6. \_\_\_\_\_ 12. \_\_\_\_\_

**\*Make Checks Payable to:\***

**CHRIS OWEN**

**Mail To:**

**2820 MOSSY CREEK DRIVE  
LITTLE ROCK, AR 72211**

**PLEASE WRITE ONE CHECK PER TEAM!!**

**FOR MORE INFORMATION CONTACT NICK SHERWOOD  
[NSHERWOOD6@GMAIL.COM](mailto:NSHERWOOD6@GMAIL.COM) 501.400.3631**