2009 Team Entry Form

Rugby Virginia Youth Tournament
August 1-2, 2009
Springfield, VA

TEAM INFO

Team Name _____ Club _____

Age Group _____ Touch or Tackle _____

Team Coach/Contact Name _____

Street Address _____

City _____ State _____ Zip _____

Email _____ Phone _____

PLAYER ROSTER INFO

(attach additional sheets if necessary)

Player's Name	Birth Date	Address	City/State/Zip	T-Shirt Size