



HIGH DESERT YOUTH SOCCER



LEAGUE PRESENTS:

8th Annual 5v5 Memorial Day Classic Tournament

May 24, 25, 26 2025

Team Name _____ Uniform Color _____

Division U9 ____ U10 ____ U12 ____ U14 ____ U18 ____ COED ____ GIRLS ____

Head Coach _____ Phone # _____

Asst. Coach _____ Phone # _____

City _____ Contact Email _____

	Player's Name	Player ID #	Date of Birth
1			
2			
3			
4			
5			
6			
7			
8			

APPLICATION FEE'S: \$250 Per Team Call Us @ 760-792-5553 for Payment Link

EMAIL APPLICATION: HDYSL@VERIZON.NET

ALL APPLICATIONS ARE SUBJECT TO APPROVAL

Your Signature confirms everything is true and correct. Once entered in the Tournament a confirmation will be sent to the email address provided.

COACH SIGNATURE: _____ DATE: _____