

2025 Eugene Metro FC 3v3 Challenge Cup Tournament Entry Form June 7, 2025

Les Schwab Sports Park

250 South 32nd Street, Springfield, OR 97478

Entry Fee is \$200. Maximum of 5 players per team. 4 game guarantee. Registration deadline is Tuesday May 20, 2025.

Payment Options: 1. Pay online via our website: https://www.emfc.org/payment/

2. Make out check to EMFC and mail to EMFC, PO Box 10914, Eugene OR 97440

YOU MUST REGISTER YOUR TEAM ONLINE VIA OUR WEBSITE IN ADDITION TO THIS ENTRY FORM.

General Information

Games will be played on Turf fields at Les Schwab Sports Park in Springfield. Duration of games is two 12-minute halves. Tournament rules can be found on the website. Game schedule will be posted on the website on Friday May 24, 2024. Games will start at 9am and end around 7pm.

All schedules and rules will be posted on www.emfc.org

No refunds are given. For more info, please call 541-343-5100 or email sebtrickett@yahoo.com

Divisions: There will be separate boys & girls brackets for each age group

Age group determined by OYSA 2024/2025 age chart

U8	oldest player born in 2017	U13	oldest player born in 2012
U9	oldest player born in 2016	U14	oldest player born in 2011
U10	oldest player born in 2015	U15	oldest player born in 2010
U11	oldest player born in 2014	U16	oldest player born in 2009
U12	oldest player born in 2013	U19	oldest player born in 2006

Eugene Metro FC 3 v 3 Challenge Cup Entry Form – Deadline for entry is May 20, 2025

Mail completed forms to: Eugene Metro Fútbol Club

P.O. Box 10914 Eugene, OR 97440 Please email sebtrickett@yahoo.com a copy or picture of signed roster and Entry form. Player 1 (Captain) Player 2 _____ Address

City ______ State ____ ZIP ____

Phone (1) _____ (2) ____

Male / Female Age ____ DOB ____ / ____/ ____ Address_____
 City ______ State _____ ZIP _____

 Phone (1)______ (2) _____

 Male / Female Age_____ DOB ____ / ____ / _____
 Signature Signature Signature of Parent / Guardian Signature of Parent / Guardian By signing, you have read & agreed to the *Waiver of By signing, you have read & agreed to the *Waiver of Liability & Rules, as well as the Medical Release. Liability & Rules, as well as the Medical Release. Player 3 _____ Address

City _____ State ___ ZIP ___

Phone (1) ____ (2) ___

Male / Female Age ____ DOB ___ / ___ / ____ Signature Signature Signature of Parent / Guardian Signature of Parent / Guardian By signing, you have read & agreed to the *Waiver of Liability By signing, you have read & agreed to the *Waiver of & Rules, as well as the Medical Release. Liability & Rules, as well as the Medical Release. Player 5 Address

City _____ State ____ ZIP ___

Phone (1) ____ (2) ___

Male / Female Age ____ DOB ___ / ___ / ____ **Entry Fee:** Entry fee of \$200 per team must be paid online or via check. Please make checks payable to Eugene Metro Fútbol Club **Mail Entry Form To:** Eugene Metro Fútbol Club Signature ___ P.O. Box 10914 Signature of Parent / Guardian Eugene, OR 97440 By signing, you have read & agreed to the *Waiver of Liability ALL ENTRIES MUST BE RECEIVED BY MAY 20, 2025 & Rules, as well as the Medical Release.

*Waiver of Liability: Signatures on the registration form signify each person has read, understands and abides by this information. There are risks connected with my participation in this tournament and its related activities. I release, waive, discharge and covenant not to sue Eugene Metro Fútbol Club, and both groups affiliate organizations, event sponsors, event charities and their workers, employees and directors, and the staff and organizers from all action, suits and demands whatsoever in law or in equity from demand, losses or damages on account of injury including death caused in whole or in part by the negligence of the releasee or otherwise. Further, I hereby grant full permission for event organizers to record any or all of my participation in this event for photos, motion pictures, TV, radio, recordings, videotapes, and other media known or unknown, and to use them, no matter by who taken, in any manner for publicity, promotions, advertising, trade or commercial purposes, without any reimbursement of any kind due to me, or the need to pay me any fee.

Signature of Coach / Manager:

By signing, you have read & agreed to the *Waiver of Liability & Rules

Medical Release and liability waiver:

I authorize medical and diagnostic care, and a treating physician for my child may perform hospital procedures as if I cannot be reached in the case of an emergency. I agree that neither I nor my child will bring any claims against EMFC or its tournament or camp coaches as a result of any injuries, expenses or damages that I or my child may suffer in connection with the program whether such claims, known or unknown, may arise in the future.

ROSTER FORM – PLEASE SEND WITH ENTRY FORM AND DON'T FORGET TO REGISTER THE TEAM ONLINE VIA OUR WEBSITE.

