

CLUB LEAGUE APPLICATION

The California Cup

Name of Club _____

Team Contact _____

Phone _____

Email _____

Address _____

Facilities Available _____

Please email dates your club would like to be considered for hosting.

Entering the following age brackets:

18 Boys _____

16 Boys _____

14 Boys _____

12 Boys _____

10 & Under _____

18 Girls _____

16 Girls _____

14 Girls _____

12 Girls _____

If not paying on-line please mail payments to:

California Cup League

PO BOX 310584

Fontana, CA 92331