

Needham Memorial Day Tournament

INVITATIONAL AND NORTHEAST RUSH COLLEGE SHOWCASE

2024 Team Check-in Cover Sheet

Send as first page of Fast Lane pdf or bring to regular team check-in

Team Name:	·
Age Group:	
Team check-in me	thod:
	Fast Lane- Upload via GotSport
Check each item b	elow to confirm that you have all necessary paperwork:
	Roster for tournament- current approved league roster
	ONE form of proof of age for each player - in order of preference:
	1. Name and birth date on official league roster OR
	2. Name and birth date on an official passcard OR
	3. Copy of birth certificate or passport- for these players provide proof of insurance from a state entity or US soccer
	2024 NMDT Medical release signed by parent/legal guardian for EACH player (Yes electronic signatures allowed)
	All Players must be registered with U.S. Soccer (USYSA, US Club Soccer, or other entity of U.S. Soccer)
	Showcase teams only: Team Roster entered into GotSoccer by 5/15
	Fast Lane, PDF Upload, plus originals with you at tournament.
Name and phone of	of ONE team contact person during tournament:
Name:	Phone:
Fast Lane only - na	ame and email of ONE contact person for check-in issues:
Name:	Email:
To be signed by	team representative responsible for Fast Lane Check-in:
additions of player agree that any cha representative prior	as the designated team representative I am responsible for submitting any changes (including rs) to the aforementioned roster which is being submitted for Fast Lane Check-in. I hereby inges to the submitted roster must be approved by a designated Needham Soccer Club or to the commencement of the team's first game. Failure to adhere to these conditions will ture of any and all affected games.
Signed:	Date: