

2014 PRO SOCCER COMBINE MEN'S APPLICATION

JANUARY 7-9, 2014 - BRADENTON/SARASOTA, FLORIDA

Name:	Date of Birth:
Permanent Phone: ()	Mobile Phone: ()
email address:	
	ddress is valid and that you have frequent access to it)
•	State: Zip:
Twitter Screen Name (if ava	ilable)
Position Played (ONLY LIST	ONE): (Goalkeepers <u>must</u> have collegiate or professional experience)
Height: Weight:	Size of Jersey (circle one): S M J XI XXI
. 101g.11 17 01g.11	Size of Jersey (circle one): S M L XL XXL (We make every attempt to provide you the requested size, but cannot guarantee it)
Any injuries/surgeries durino	g career? (List type, date and result):
List any pertinent medical co	onditions (asthma, diabetes, allergies, etc.):
List any pertinent medical co	onditions (asthma, diabetes, allergies, etc.):
	onditions (asthma, diabetes, allergies, etc.): es or No (circle one) From what Country:
Do you have a passport? Y	es or No (circle one) From what Country:
Do you have a passport? Y Do you have dual citizenship	es or No (circle one) From what Country: b with another country? If so, which country?
Do you have a passport? Y Do you have dual citizenship	es or No (circle one) From what Country: b with another country? If so, which country?
Do you have a passport? Y Do you have dual citizenship If you are <u>not</u> a US citizen, p	es or No (circle one) From what Country: b with another country? If so, which country? blease indicate your US residency status:
Do you have a passport? Y Do you have dual citizenship If you are <u>not</u> a US citizen, p	es or No (circle one) From what Country:
Do you have a passport? Y Do you have dual citizenship If you are not a US citizen, p Please provide the BIRTHP Mother:	es or No (circle one) From what Country:
Do you have a passport? Y Do you have dual citizenship If you are <u>not</u> a US citizen, p Please provide the <u>BIRTHP</u> Mother:	es or No (circle one) From what Country:
Do you have a passport? Y Do you have dual citizenship If you are <u>not</u> a US citizen, p Please provide the <u>BIRTHP</u> Mother:	es or No (circle one) From what Country:
Do you have a passport? Y Do you have dual citizenship If you are <u>not</u> a US citizen, p Please provide the <u>BIRTHP</u> Mother: Father: Paternal Grandmother:	es or No (circle one) From what Country:
Do you have a passport? Y Do you have dual citizenship If you are <u>not</u> a US citizen, p Please provide the <u>BIRTHP</u> Mother: Father: Paternal Grandmother: Your Agent's Name:	es or No (circle one) From what Country: o with another country? If so, which country? blease indicate your US residency status: LACE for each of the following: Yourself: Maternal Grandmother: Maternal Grandfather: Paternal Grandfather: Agent's email:
Do you have a passport? Y Do you have dual citizenship If you are not a US citizen, p Please provide the BIRTHP Mother: Father: Paternal Grandmother: Your Agent's Name: Agent's Phone:()	es or No (circle one) From what Country: o with another country? If so, which country? blease indicate your US residency status: LACE for each of the following: Yourself: Maternal Grandmother: Maternal Grandfather: Paternal Grandfather: Agent's email: Agent's FAX: ()
Do you have a passport? Y Do you have dual citizenship If you are not a US citizen, p Please provide the BIRTHP Mother: Father: Paternal Grandmother: Your Agent's Name: Agent's Phone:() Agent's Address:	es or No (circle one) From what Country:

WWW.INFOSPORTINC.COM
E-MAIL: SOCCER@INFOSPORTINC.COM

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WORCESTER, PA 19490
USA
FAX 215-689-1479



2014 Pro Soccer Combine

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COLLEGE SOCCER EXPERIENCE:			
College attended:	_ Head Coach:		
Coach's Office Phone Number:			
Final Season of eligibility (provide year):			
Participation in this event could impact collegiate eligibility. If you have	ve eligibility remaining, co	nsult with your coac	h or Ath. Dir.)
College Stats/Honors/Records:			
-			
CLUB SOCCER EXPERIENCE:			
PROFESSIONAL SOCCER EXPERIENCE:			
NOT EGGIONAL GOGGEN EXTERNOL.			
PAYMENT INFORMATION:	A.T.O.		
Calculate your total: DISCOUNTS FOR EARLY REGISTE			
Combine Fee \$299 (postmarked or fax'd <u>on or before</u> Sep	· ·		
Combine Fee \$319 (postmarked or fax'd <u>on or before</u> Oct	·		
Combine Fee \$329 (postmarked or fax'd <u>on or before</u> Oct		_	
Combine Fee \$339 (postmarked or fax'd <u>on or before</u> Nov			
Combine Fee \$359 (postmarked or fax'd <u>after November</u>	15, 2013)		
Spectator/Guest Pass \$5 each			
CATERED BOX LUNCH PROVIDED FREE TO REGISTED O Please check here if you prefer a vegetarian lunch	RED PLAYERS ON	TWO DAYS	
FOTAL \$			
Select Method of Payment: SORRY, PERSONAL CHE		D	
Certified Check or Money Order enclosed (made payab	le to InfoSport, Inc.)		
o American Express, Visa or MasterCard			
Credit Card Number:		Exp. Date:	
Name as it appears on the card:	с	ard Security Cod	le:
Pilling Addross:			
Billing Address:			
City:	State:	Zip:	
Signature of Card Holder:			
NOTE: CREDIT CARD ORDERS WILL BE BILLED A 5% PROC	ESSING FEE, BASED	ON THE TOTAL B	ILL)
Application Deadline: All applications are processed on a fir You will be notified of your acceptance by mail or email. Mai			
materials to: InfoSport, Inc., P.O. Box 825, Worcester, PA 194	90, USA – or FAX: 215-	-689-1479.	•
Refund policy available at www.infosportinc.com. FULL R PARTIAL REFUNDS AVAILABLE BETWEEN 10/2/13-12.			
see web site for details	15/15. NO INCIDE	3 ALTER 12/13/	10. 1 16a36
			Web site 7/24/1

MEN'S APPLICATION

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