



## 2018 GMT TEAM INFORMATION FORM

Team Name \_\_\_\_\_

Club: \_\_\_\_\_

Gender: Boys Girls

Age Group: U10 U11 U12 U14 U15 U16 U17 U18

Team Contact: \_\_\_\_\_ Phone No. \_\_\_\_\_

Cell No. \_\_\_\_\_

Email \_\_\_\_\_

Coach: \_\_\_\_\_ Phone No. \_\_\_\_\_

Cell No. \_\_\_\_\_

Email \_\_\_\_\_

\_\_\_\_\_

For Traveling Teams: Please provide this information so that we can reach you if there are any changes or problems during the tournament, Thank you!

Team Hotel:

Phone No. \_\_\_\_\_

Name of Reservation:

Room No. \_\_\_\_\_

*Please turn this form in at Check-in. Thank you.*