



ONE LOWELL WORLD CUP

"Building Unity Through Soccer"

www.onelowellsoccercup.org

ONE Lowell World Cup 2010 Application

Team Manager

Please fill out this application in detail and return to Willian Ferreira-Fahlberg at Will.Fahlberg@gmail.com or mail to ONE Lowell Office at 9 Central Street - Suite 203 - Lowell, MA 01852 USA

Thank You

Your Name:

Address:

Email:

Phone Number:

Nation you wish to represent:

Your affiliation with this nation and community:

You are allowed to have up to 22 players in your roster. Can you guarantee that at least 17 players are either born or have heritage from the country you represent?

Yes No

What city would the majority of your players and supporters be located:

Do you have affiliations with community leaders from your heritage? Which ones?

Do you have the ability to deliver a large audience to watch your team play during the ONE Lowell World Cup? How?

Can you provide sponsorship opportunities to your team and/or ONE Lowell World Cup? If so, please give details:

Do you have media or press contacts to bring more publicity to your team and the ONE Lowell World Cup? If so, please list them:

Would you and your team agree to be part of any documentary or media content that ONE Lowell World Cup may be affiliated with and sign release forms as a testament to this agreement?

Yes No

What other qualities, if any, can you bring to help the ONE Lowell World Cup the largest and most recognized soccer tournament in Massachusetts?

Can you provide volunteers to participate in this year's ONE Lowell World Cup?

Will you as a representative of both OLWC and the community you are applying for adhere to the spirit, philosophy and all the rules and regulations (please refer to the rules and regulations provided at www.onelowellsoccercup.org) of the OLWC, or be subject to disqualification or suspension of future OLWC tournaments:

Yes No

Please add any additional information below which will help the OLWC make a decision to accept your application to participate in the OLWC 2010:

Return the completed application form with a deposit of \$300 by May 1st. Remember the full payment date is July 1st 2009. Make checks payable to ONE Lowell.

*ONE Lowell, 9 Central St., Suite 203, Lowell, MA 01852
978-654-6957*

***If you have any queries or comments please contact:
Will Ferreira-Fahlberg at 617-840-4677 or at Will.Fahlberg@gmail.com***