Team Name(Town)

SOMORAUK

Team Manger Name

JOHN JOHNSON

Your Mailing Address:

Your Phone Number Your Cell Phone #:

815 498-9592 735-4222

Your Work Phone #:

Your Fax Number:

Your Email Address: inmeta

@ gol.com

	Sun	Mon	Tues.	Wed.	Thur.	Fri.	Sat.
Apr 29 - May 5	29	6 PM 30	6 PM 1	2	3	4	5
May 6 - May 12	6	7	8	9	10	11	12
May 13 - May 19	13	14	15	16	- 17	18	19
May 20 - May 26	20		22	23	24	25	26
May 27 - June 2	.27	Memorial Day 28	29	30	31	1	2
June 3 - June 9	3	4	5	6	7	8	9
June 10 - June 16	10	11	. 12	13	14	15	16
June 17 - June 23	17	18	19	20	21	22	23
June 24 - June 30	24	V 25	26	27	28	29	30

Team Availability										
	Sun	Mon	Tues.	Wed	Thur.	Fri.	Sat.			
Apr 29 - May 5	29	30	1	2002	06 3	NG 4	NG 5			
May 6 - <b>M</b> ay 12	6	7	8	a a	2010	16-11	NG 12			
May 13 - May 19	13	14	15	10-10	NG17	NG 18	2619			
May 20 - May 26	20	21	12	23	16-24	NG 25	NG 26			
May 27 - June 2	27	Memorial Day 28	1	NG 30	31	NG 1	NG 2			
June 3 - June 9	3	4	5	6	NG 7	NG 8	16 9			
June 10 - June 16	10	11	12	>6/3	NG 14	NG 15	NG 16			
June 17 - June 23	17	18	<b>1</b> 9	20-20	16 21	na 22	NG 23			
June 24 - June 30	24	25	26	NG 27	NG-28	NG 29	NG 30			

FNA - Field Not Available

NG - No Game That Day For Team

Please Indicate game days and times Available



