

**The 2026 FC814 Classic**  
**Hosted by the Summit Tennis and Athletic Club**  
**ALTOONA, PA**

**Saturday & Sunday – January 10 & 11, 2026**  
**Saturday & Sunday – January 17 & 18, 2026**

**Age Groups**

Saturday, January 10<sup>th</sup>: Senior High Girls, O-40

Sunday, January 11<sup>th</sup>: Junior High Girls, Men's Open

Saturday, January 17<sup>th</sup>: Senior High Boys, Women's Open

Sunday, January 18<sup>th</sup>: Junior High Boys, O-30

All preliminary and championship games for each age group will be played on the same day.

**Entry Fee**

The entry fee is \$275 made payable to: FC814

\*\*O-40 and Women's Open fee is \$190

**Entry Deadline**

Entries will be accepted on a first come, first serve basis. **Registration deadline is December 30, 2025. PLEASE REGISTER EARLY!!**

**Format**

Three game minimum - 25 minute games. Teams will play with six field players and a goalkeeper (7v7). \*\*O-40 and Women's Open will play 18 minute games with 4 field players and a goalkeeper (5v5).

**Awards**

Individual and team awards will be provided for 1st and 2nd place teams

**Additional Information**

Rules of Play, Schedule & Official Roster/Liability Form will be uploaded to The Summit's website at <http://www.thesummitathleticclub.com/sports/soccer/forms> at least one week before the tournament.

**HEAD COACHES MUST BE AT LEAST 18 YEARS OF AGE!**

**Inquiries:**

Mike Alianiello

2309 12<sup>th</sup> Street

Altoona, PA 16601

814-937-6667

Email – [summitindoorsoccer@hotmail.com](mailto:summitindoorsoccer@hotmail.com)

# The 2026 FC814 Classic

## Registration Form

Saturday & Sunday, January 10 & 11, 2026

Saturday & Sunday, January 17 & 18, 2026

### Age Groups

Junior High/Senior High divisions: Players must be from the same school or school soccer team (co-op programs are allowed)

#### Male

Junior High ☐

Senior High ☐

Open ☐

O-30 ☐

O-40 ☐

Grades 6-8

Grades 8-11

Must be at least 16 years old

Must turn 30 in 2026

Must turn 40 in 2026

#### Female

Junior High ☐

Senior High ☐

Open ☐

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

Coach/Contact Name \_\_\_\_\_

City, State & Zip \_\_\_\_\_

Email \_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_

Please return the completed registration form to:

**Mike Alianiello**

**2309 12<sup>th</sup> Street**

**Altoona, PA 16601**

**Registrations are due no later than December 30, 2025!!**

#### For Credit Card Payment Only

☐ VISA

☐ MASTERCARD

☐ DISCOVER

Card #: \_\_\_\_\_ Expiration Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Zip Code: \_\_\_\_\_ Security Code \_\_\_\_\_

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_