

# FALL SOCCER 2010

**TEAM:**

**Grade:**

Coach: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Cell Number: \_\_\_\_\_  
 Home Number: \_\_\_\_\_



Asst Coach: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Cell Number: \_\_\_\_\_  
 Home Number: \_\_\_\_\_

\*\*Will you need a Practice site or do you have your own? \_\_\_\_\_

\*\*If you have your own, where and when are your practices? \_\_\_\_\_

Team Parent: \_\_\_\_\_

**Family Member : \$50**

**Activity Member: \$80**

	Name	Age/ Grade	School	Parents/Guardians	Best Contact Phone	Email	Receipt #	Price
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								

PK Kinder (no keeper): Roster Min - 8, Max - 12  
 1st-6th: Roster Min - 9, Max - 14