



PLAYER'S NAME \_\_\_\_\_ M / F

D.O.B. \_\_\_\_\_ AGE: \_\_\_\_\_ YEARS PLAYING SOCCER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

RECREATIONAL LEAGUE: \_\_\_\_\_

PARENTS/GAURDIANS NAMES: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

CELL NUMBER: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

SHIRT SIZE: YOUTH SMALL YOUTH MED YOUTH LARGE ADULT SMALL

SHORTS SIZE: YOUTH SMALL YOUTH MED YOUTH LARGE ADULT SMALL

SOCK SIZE: YOUTH SMALL YOUTH MED YOUTH LARGE ADULT SMALL

NUMBER ON JERSEY: 1<sup>ST</sup> CHOICE \_\_\_\_\_ 2<sup>ND</sup> CHOICE \_\_\_\_\_ 3<sup>RD</sup> CHOICE \_\_\_\_\_

-PARENT PERMISSION FOR PHOTO RELEASE TO CARD PLAYER IN THE LEAGUE: YES OR NO

-PLEASE EMAIL ME A COPY OF CHILD'S BIRTH CERTIFICATE AND A PHOTO...tomjazzee@verizon.net.

