AYSO 26th Annual Kachina Klassic Roster

Roster Date:

Region/ Non AYSO ID#: _____ **Team Name:** _____

Coach Name: _____

Asst. Coach Name: _____

Uniform Colors:
Shirts: _____ **Shorts:** _____ **Socks:** _____

Age Division: **U-10** **U-12** **U-14** **U-16** **U-19** **Boys** **Girls** **Coed**

***Maximum # of Players*:**				
U-10	**U-12**	**U-14**	**U-16**	**U-19**
10	**15**	**15**	**18**	**18**

eAYSO Roster Note: You may submit an eAYSO roster in lieu of this roster form by attaching it to this form.. If you do, make sure the Regional Commissioner signs that form. If you also will be bringing Guest Players, you will need to use the separate 2012 Kachina Klassic Guest Player Form. Regional Commissioner / Club President or Registrar must sign application and team roster.

Directions: *Player ID #*: The National AYSO Registration Number, *Region or Club #*: Region or club in which player is registered.

(List In Order By Uniform Shirt No.)

Jrsy #	Region or Club #	Player ID #	Player's Name Last, First (please print)	Age	Date of Birth	

By my signature below, I certify that all players on this roster are valid registered players in my region and are approved to participate in this tournament:
Regional Commissioner/ Club President or Registrar must sign team roster.

_____
Print Name ***Signature (Blue or Red Ink)***

Guest Player(s) Regional Commissioner / Club President or Registrar must team roster:

_____
Print Name ***Signature (Blue or Red Ink)***