

26th Annual AYSO Turkey Tournament





		Roster Date:					
Region:		Team Name: _					
	Coach Name:						
Asst.	Coach Name:						
Uniform Colors:Shirt:			Shorts:	Socks:			
Age Division: U-10			U-14 ← (Circle applicabl			S	
Maximum # of Players:		eAYSO Roster do, make sure	eAYSO Roster Note: You may submit an eAYSO roster in lieu of this roster 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 Guest Player Form.				
U-10 10	U-12 U-14 12 15	Team level of play: Rec Team Tournament Team (check one)					
<u>Directions: Player ID #</u> : The National AYSO Registration Number, <u>Region #</u> : Region in which player is registered.							
(List In Shirt#	Order By Last Region #	Name) Player ID #	Dlover's Neme	- of Plant (alone a male t)	100	Date of Birth	
SIIII (#	Region #	Playel ID#	Player's Name L	ast, First (piease 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:							
Regiona	al Commission						
R.C. Contact number:			Print Name		(Blue or F	Red Ink)	
Guest F Commis	Player(s) Regionssioner:	nal 					
		Print	Print Name		Signature (Blue or Red Ink)		
G.P. R.C. Contact #:							