AYSO Battle at the Beach Team Roster

Roster Date:

Region: _____ **Team Name:** _____

Coach Name: _____ **Safe Haven Date** **Training Level**

Asst. Coach Name: _____ **Safe Haven Date** **Training Level**

Uniform Colors:

Shirt: **Shorts:** **Socks:**

U9	U10	U11	U12	U13/14
10	10	12	12	15

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

(List In Order By Uniform Shirt No.)

Shirt #	Region #	Player ID #	Player's Name Last, First (please print)	Age	Date of Birth	Telephone Including Area Code

Please submit Blue Sombrero roster with Regional Commissioner's signature. Roster should be listed in number order and include all coach / asst coach information

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: _____

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

Guest Player(s) Regional Commissioner: _____

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