This form is intended solely for borrowing players from regions outside your own.

All players within your region must appear on the approved Affinity Jersey order roster.

	Borrowing Team Information:				Roster Date:				
	Region: Region Name:			egion Name:					
		Coach Nar							
	Age	Division:	U-10	U-12 U	J-14	Boys		Birls	
T	ourna	mont ru	les allow team	se to bring up t	o 3 "Gue	et Dlave	are" wh	nen they ar	e unable to
Tournament rules allow teams to bring up to 3 "Guest Players" when they are unable to recruit sufficient players from their own region. These Guest Players must be AYSO									
registered for the 2024 Membership year.									
(List In Order By Uniform Shirt No.)									
;	Shirt #	Region #	Player ID #		(please print)		<u>Age</u>	<u>Date of</u> Birth	Telephone Including Area Code
D.	:	~~~				d	- d l v		and are
By my signature below, I certify that all players on this roster are valid registered players in my region and are approved to join the above team and participate in this tournament:									
Gı	uest P	rlaver(s) R	egional Commiss	sioner:					
	Guest Player(s) Regional Commissioner: Print Name Best Email: Cell:								
B	estem	ıaıı:		Ce	u:				
Si	gnatur	e:			_				
			(Red or Blue Ink)						
_			w, I approve that the and participate in th		of players) g	uest playe	rs are app	proved to	
Н	ost Te	am Regior	nal Commissione	r:					
					Print Nar	me			
Si	gnatur	ъ.							

(Red or Blue Ink)