

PAL Soccer League
P.O. Box 50
Niceville, FL 32588-0050

2026 Pairing Request

1. For requesting the pairing of either:
 - A team sponsor and a coach, or
 - A head coach and one assistant.
2. Limited to one request per team if both requestors will have children on the team. (Not applicable to U6.)
3. **Must** be signed by **both** requestors and received by PAL by **July 25, 2026!**
4. Either email as a pdf attachment to howard_hill@cox.net or mail to the address above (allow enough time in transit). Both requestors will be sent an email verification of receipt.

5. First requestor:

Name _____ Phone _____

Email _____

(Check one): Team sponsor ___ Head coach ___ Assistant coach ___

Child's name _____

Child's birth date _____ Boy _____ Girl _____

Child's age division: U6 U8 U10 U12 U14 HS

Signature _____ Date _____

6. Second requestor:

Name _____ Phone _____

Email _____

(Check one): Team sponsor ___ Head coach ___ Assistant coach ___

Child's name _____

Child's birth date _____ Boy _____ Girl _____

Child's age division: U6 U8 U10 U12 U14 HS

Signature _____ Date _____