



Sponsored by AYSO Region 121 Simi Valley, California

15th Annual Simi Valley AYSO New Year's Tournament 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: _____	
Age Division: _____	U-10	U-12	U-14
			Boys
			Girls
			Coed

Maximum # of Players:			
U-10	U-12	U-14	
10	12	15	

eAYSO Roster Note: You must only submit eAYSO rosters in lieu of this roster form. This is for example only and 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.

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 <small>Last, First (please print)</small>	Age	Date of Birth	Telephone <small>Including Area Code</small>

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)