

# YOUTH FUTSAL LEAGUES + TOURNAMENTS TEAM APPLICATIONS



U-8	U-9	U-10	U-11	U-12	U-13	U-14	U-15	U-16	U-17/18
<input type="checkbox"/> Boys	<input type="checkbox"/> Boys	<input type="checkbox"/> Boys	<input type="checkbox"/> Boys	<input type="checkbox"/> Boys	<input type="checkbox"/> Boys	<input type="checkbox"/> Boys	<input type="checkbox"/> Boys	<input type="checkbox"/> Boys	<input type="checkbox"/> Boys
<input type="checkbox"/> Girls	<input type="checkbox"/> Girls	<input type="checkbox"/> Girls	<input type="checkbox"/> Girls	<input type="checkbox"/> Girls	<input type="checkbox"/> Girls	<input type="checkbox"/> Girls	<input type="checkbox"/> Girls	<input type="checkbox"/> Girls	<input type="checkbox"/> Girls

Location: 3337 Business Circle  
North Charleston, SC 29418

8 game minimum: 45 minute games (1st qtr 20 min, 5 min break, 2nd qtr 20 min)

Players: 12 Player Maximum Rosters

Registration Fee: \$\_\_\_\_\_ .00

Contact person: Yang Scofano  
iSOL- 843-471-3373

Level of Competition: Club Level  Rec Level

## TEAM INFORMATION

Age groups may be combined in an effort to make brackets. A separate application must be completed for each team entering. Please check the level, age group and gender.

Team Name: \_\_\_\_\_ Tel: \_\_\_\_\_ Cell: \_\_\_\_\_

Coach/Primary Contact: \_\_\_\_\_

Email Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## OFFICIAL USE FOR LEAGUE ONLY

League Fee (\$): \_\_\_\_\_ Performance Bond (\$): \_\_\_\_\_ Referee/game (\$): \_\_\_\_\_

Team Liability: \_\_\_\_\_ Waiver Team: \_\_\_\_\_ Roster: \_\_\_\_\_

# of Players: \_\_\_\_\_ Rules: \_\_\_\_\_

# TEAM ROSTER



Season: \_\_\_\_\_ Date: \_\_\_\_\_ Event: \_\_\_\_\_

Team Name: \_\_\_\_\_ Team Contact: \_\_\_\_\_

#	PLAYERS		DATE OF BIRTH	PLAYERS CARD	
	Last Name	First Name			
1			____/____/____	Yes <input type="checkbox"/>	No <input type="checkbox"/>
2			____/____/____	Yes <input type="checkbox"/>	No <input type="checkbox"/>
3			____/____/____	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4			____/____/____	Yes <input type="checkbox"/>	No <input type="checkbox"/>
5			____/____/____	Yes <input type="checkbox"/>	No <input type="checkbox"/>
6			____/____/____	Yes <input type="checkbox"/>	No <input type="checkbox"/>
7			____/____/____	Yes <input type="checkbox"/>	No <input type="checkbox"/>
8			____/____/____	Yes <input type="checkbox"/>	No <input type="checkbox"/>
9			____/____/____	Yes <input type="checkbox"/>	No <input type="checkbox"/>
10			____/____/____	Yes <input type="checkbox"/>	No <input type="checkbox"/>
11			____/____/____	Yes <input type="checkbox"/>	No <input type="checkbox"/>
12			____/____/____	Yes <input type="checkbox"/>	No <input type="checkbox"/>

\*\*\*A Youth Player Registration form must be filled in by every player on the rosters and/or team. All player's registration form MUST be attached to the team registration package.\*\*\*