CBYSA 2020 SPRING LEAGUE REGISTRATION FORM

We will have a Home/Away Schedule for All Teams.

Travel will be Required. The Home Team/Club is Responsible for Field and Referee Fees.

TEAM INFORMATION

Team Name:			G	ender: 🗌 Boys	Girls	
Club/Assoc:				Division:		
	Age Gro	up is defined by the	oldest player	on the team.		
☐ U14 0	1/01/09 - 12/31 1/01/06 - 12/31 1/01/03 - 12/31	U 9 01/01/1 1/09 U12 01/01/0 1/06 U15 01/01/0	11 - 12/31/11 08 - 12/31/08 05 - 12/31/05 02- 12/31/02	U10 01/01/10 U13 01/01/07 U16 01/01/04 U19 01/01/01	- 12/31/07 - 12/31/04	
Coach N Addre City, Zip E-mail Ad	ess	TEAM CONTACT	Harra - Di-	one		
Contact N Addre City, Zip E-mail Ad	ess Code		Home Ph Work Pho Cell Pho	one		
Age Groups D2/D3/D4		Commitment Deadline 2/7/2020	Start of Season 2/22/2020	n Roster Frozen 3/16/2020		
ls you	r team participa	ating in S TX Cup, Dire	ector's Cup or	President's Cup? _		
Administrative Team Fee for <u>U9-U10: \$50.00</u>						
U10 and D3	Administrative Team Fee for <u>U11-U18 Di</u>			2: \$150.00	No games	
Playoffs will be held on	Administrative Fee for <u>011 – 014 Div. 3: \$150.00</u>				3/14-3/15 and 4/11-4/12,	
May 2 & 3, location TBD					season ends 4/25-4/26	
	The Con	npetition Committee W	'ill Administer A	II League Play.		
		For Additional Info	rmation Contact:			
John Rodriguez, CBYSA President jrodnrg71@gmail.com • Monica Hatton, Executive Admin executive.admin@cbysasoccer.org						
Signature of Team Representative Date						
Date Received:		Amount Paid:		Accepted By:		