



Fontana AYSO Speedway Classic 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 U-16 Boys Girls Coed

<u>Maximum # of Players:</u>				
U-10	U-12	U-14	U-16	
10	12	15	18	

eAYSO Roster Note: You are encouraged to submit an eAYSO roster in lieu of this roster form. If you do, 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)