

UAYSL 2017 Outdoor Session - Team Entry Form 11U ('06) & 12U ('05) Competitive – 9v9 – 14 Games

Team Entry Form & Team Entry Fee of \$600: Emailed/Postmarked on or before Wed., May 3, 2017

Player Fees & Roster: Emailed/Postmarked on or before Wednesday, May 24, 2017

Player Fees: UAYSL Annual Player Fee - \$60.00 paid with a player's 1st league session of 2016/2017.

Dual Roster Player Fee: \$10/additional team/session. Out-of-Town Team Player Fee: \$20/session

Withdrawals must be emailed to the league administrator at uaysl.info@yahoo.com

Withdraw before bracketing = Full refund / Withdraw after bracketing (date on website) = No refund

UAYSL Club _____ **Team Name** _____

Gender: Boys _____ Girls _____ **Actual age of team:** 11U _____ 12U _____

Requested age for games: True Age _____ Flex _____ **Requested Flex Age Group** _____ **Flex:** Partial _____ 100% _____

12U Only Option: 10 of the 14 games played at 9v9 with last 4 games flexed up to 11v11 in September. Yes _____ No _____

Coach name _____ **email** _____

Phone (home) _____ **(work)** _____ **(cell)** _____

Manager name _____ **email** _____

Phone (home) _____ **(work)** _____ **(cell)** _____

GAME DE-CONFLICT SCHEDULING REQUESTS: Due to a high level of requests from coaches who coach multiple teams it is impossible to accommodate all coaching conflict requests. Coaches must plan on having an assistant coach to cover when game conflicts cannot be avoided or the head coach is absent for any reason, including team/coach travel. List below, in order of priority, the teams which you would like to be considered for game de-confliction. No requests listed = no de-confliction.

1st _____ 2nd _____ 3rd _____

TEAM TRAVEL SCHEDULING REQUESTS: List below the dates the TEAM (not the coach or individual players) will be traveling and not available for UAYSL games. Be sure to include travel dates not just tournament/camp dates. It may not be possible to accommodate all team travel dates. Please list in order of priority. Requests not listed here will not be honored.

1st _____ 2nd _____ 3rd _____

This Team Entry must be verified by (signature) of the **Head Coach** _____ **AND**

Team Manager or Club Registrar _____ **for Club** _____

All players must be registered with Alaska Youth Soccer for the 2016-2017 Season prior to playing with UAYSL.

Roster Information:

- ❖ Roster Size – Min 9/Max 18 per the UAYSL rules posted on the website at www.uaysl.org.
- ❖ Roster must include player name (Alpha by last name), birth date, jersey number, applicable player fees, coach & manager names, phone numbers and email contacts, team name and club. If submitted roster is not in the requested format it will be returned for correction. **Roster must be submitted using the UAYSL Roster Template which is posted on the website.**
- ❖ Games will be played Monday-Thursday evenings through August 17 with Saturday/Sunday daytime games only after August 17. Games begin the week of June 5 and run through September 30/early October, 2017.

Mail Entry to: UAYSL, P.O. Box 243565, Anchorage, AK 99524-3565 Questions: uaysl.info@yahoo.com

Team entry received	Date _____	\$ Pd _____	check # _____	notes _____
Player roster received	Date _____	\$ Pd _____	check # _____	notes _____
Player added	Date _____	\$ Pd _____	check # _____	notes _____