

UAYSL 2017 Outdoor Session - Team Entry Form 13U ('04) & 14U ('03) Comp – 11v11 – 14 Games

Team Entry Form & Team Entry Fee of \$700: **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 1<sup>st</sup> 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](mailto:uaysl.info@yahoo.com)**

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

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UAYSL Club \_\_\_\_\_ Team Name \_\_\_\_\_

Gender: Boys \_\_\_\_\_ Girls \_\_\_\_\_ Actual age of team: 13U \_\_\_\_\_ 14U \_\_\_\_\_

Requested age for games: True Age \_\_\_\_\_ Flex \_\_\_\_\_ Requested Flex Age Group \_\_\_\_\_ Flex: Partial \_\_\_\_\_ 100% \_\_\_\_\_

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.**

1<sup>st</sup> \_\_\_\_\_ 2<sup>nd</sup> \_\_\_\_\_ 3<sup>rd</sup> \_\_\_\_\_

**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.**

1<sup>st</sup> \_\_\_\_\_ 2<sup>nd</sup> \_\_\_\_\_ 3<sup>rd</sup> \_\_\_\_\_

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 2016-2017 Season prior to playing with UAYSL.

**Roster Information:**

- ❖ Roster Size – Min 11/Max 18 per the UAYSL rules posted on the website at [www.uaysl.org](http://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 posted on the UAYSL 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**

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