

7-A-SIDE FOOTBALL (SOCCER) TEAM

ATHLETE FORM

TEAM NAME	
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REGION	
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INSTRUCTIONS		TEAM TOTAL	
1) Fill out last name, first name, date of birth, and gender of all athletes that are being registered. 2) The "team average" shall be determined by adding together each athletes individual total score and then dividing by total roster size. 3) Please refer to the official sports rules for the <u>Football (Soccer) Team Skills Assessment Test.</u> 4) Roster Size: Must register a minimum of 7 players, no more than 12 players.		TEAM AVERAGE	

ACTIVE ATHLETES			DATE OF BIRTH	GENDER	
#	Last Name	First Name	(Month/Day/Year)	M	F
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
ALTERNATES			DATE OF BIRTH	GENDER	
#	Last Name	First Name	(Month/Day/Year)	M	F
1					
2					
3					
4					
5					
6					



7-A-SIDE FOOTBALL (SOCCER) TEAM

COACH FORM

INSTRUCTIONS

1. All coaches within your quota must be certified.
2. Alternate coaches are activated in the event active coaches are unable to attend games.
3. All volunteers for team must be registered. This includes coaches, agency staff, one-on-ones, chaperones, etc.

TEAM NAME		REGION	
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ACTIVE COACHES			DATE OF BIRTH (Month/Date/Year)	GENDER		Certification Current?	
#	Last Name	First Name		M	F	Yes	No
1							
2							
3							
4							
5							

ALTERNATE COACHES			DATE OF BIRTH (Month/Date/Year)	GENDER		Certification Current?	
#	Last Name	First Name		M	F	Yes	No
1							
2							
3							

AGENCY STAFF, 1:1, CHAPERONES, ETC.			DATE OF BIRTH (Month/Date/Year)	GENDER		Certification Current?	
#	Last Name	First Name		M	F	Yes	No
1							
2							
3							
4							
5							



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