

ACYS Team Registration

Game Field / Court Preference: Trotters Field Master's Academy Field Other _____

School / Team Name _____ Soccer Flag Football Basketball Baseball

Age Group _____ Team Colors _____ Boys Girls Practice Information: Days _____ Times _____ Location _____

Coach Name _____ Assistant Coach Name _____

E-mail _____ E-mail _____

Street _____ Street _____

City _____ Shirt Size _____ City _____ Shirt Size _____

State FL Zip _____ Home Phone _____ State FL Zip: _____ Home Phone _____

Work Phone _____ Cell Phone _____ Work Phone _____ Cell Phone _____

	Player Name	Phone	Mom	Dad	D.O.B.	Age	Shirt	Short	\$	Ck #
1										
2										
3										
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16										
17										
18										
								TOTAL		