

**ALABAMA YOUTH SOCCER ASSOCIATION
GUEST PLAYER TRAVEL ROSTER**



**** ONLY REGISTERED ALABAMA PLAYER'S INFORMATION SHOULD BE INDICATED ON**

THIS FORM**

Tournament Name _____ Date _____ Location: _____
 Team Name _____ Boys: _____ Girls _____ Coach or Manager Signature _____

This form will be Picked up or is to be FAXED TO

OR Please mail to:

Name:

Address:

City _____ State _____ ZIP _____

Please attach a copy of your roster and mark out players who will not be going.

**Fees: \$5.00 per player if paid more than 7 days prior to the tournament
 After that the fee is \$25.00 per player.
 ALL GUEST FORMS MUST BE SUBMITTED BY
 WEDNESDAY the week of the tournament.**

List Players (Last Name,First Name)	Birth Date	Club/Team played for	ID Number	Coach Signature	Registrar Signature.
1.					
2.					
3.					
4.					
5.					
6.					

AYSA REGISTRAR SIGNATURE: _____ Date _____

AYSA STATE STAMP

Instructions for completing the Guest player Roster.

THIS ROSTER MUST BE DOWNLOADED and PLAYER/ TEAM INFORMATION MUST BE TYPED IN. This change is effective as of Sept 11, 2006

Please also send with the Guest form a **copy of your roster with players not attending marked out.**

Section I In this section you put in the tournament you are attending and the team information for the team that is attending the tournament.

PLEASE INCLUDE INFORMATION TO RETURN COMPLETED FORM

Section II: In this space list each player by name birth date, name of his current club team, ID number from his current team roster, and signature of his current Club team coach and current Club team's registrar. Each player on a separate line.

Name birth Date Association or team played for, ID number coach's
signature and registrar signature.

NOTE: This guest player roster will be attached to your team roster.