

2009 Registration Form for PVYSC Classic Team Tryouts:

Name: _____ Date of Birth: ____/____/____

Current Soccer Team and Club: _____ U - _____ Rec Classic

Parent(s) Name: _____

Home Phone: _____ Other Phone Number(s): _____

Address: _____

City: _____ Zip: _____

Email: _____

Vacation contact info: (When you will be gone and how you can be reached to respond to an offer.)

Send completed forms to your team's coach or bring them to your evaluation. Contact your coach or PVYSC administrator Sean Johnson for more instructions regarding evaluations.