West Penn FUTSAL Indoor Soccer Association

UNITED STATES FUTSAL FEDERATION (USFF)

SPECIAL INSTRUCTIONS

SEASON _____/_____

CLUB _____ AGE/GROUP_____

TEAM NAME _____ DIVISION _____

MANOR Futsal_____ BLAZERS Futsal_____

COACHING CONTACT INFORMATION

NAME (LAST, FIRST, MI)	ADDRESS	CITY	ST	ZIP	AC	PHONE	WPHONE	FAX/EMAIL

PLAYERS				SEX				BIRTHDATE

_____ _____ _____ _____