TOUTH SOCCER OR THINKING TO THE SOCCER OR THINKING TO THE SOCCER OR THE SOCKER OF THE	AYSO A T May	YSO Region 15 - Central Torrance Armed Forces Day ournament y 17- 18, 2025 Roster Form	CENTRAL TORINANCE
Region/Org.:	Team Name:	Roster	Date:
Coach Name:			
Asst. Coach Name:			

Uniform Colors:

Shirt:

Age Division:

Maximum # of Players:*			vers:*		Affinity Roster Note: You are encouraged to submit an eAYSO Affinity	
8U	10U	12U	14U	16U	19U	Sports official roster in lieu of this roster form. If you do, make sure the Regional Commissioner signs that form. If you will be bringing Guest
10	10	12	15	18	18	Players, you will need to use the Guest Player Form for those players.

16U

19U

Socks:

Boys

Girls

Coed

\*AYSO may allow larger rosters for non-AYSO teams under conditions listed in Appendix 7.E of the AYSO Tournament Handbook.

Shorts:

14U

12U

<u>Directions: Region# Org. Name</u>: Region or Organization in which player is registered. <u>Player ID #</u>: The National AYSO/Organization Registration Number.

(List In Order By Uniform Shirt No.)

08U

10U

Jersey #	Region #	Player ID #	Player's Name Last, First (please print)	Age	Date of Birth	<b>Telephone</b> Including Area Code

By my signature below, I certify that all players on this roster are valid registered players in my region/Organization and are approved to participate in this tournament:

Regional Commissioner/ Organization President:

Print Name

Signature (Blue or Red Ink)

Guest Player(s) Regional Commissioner/ Organization: President

Print Name

Signature (Blue or Red Ink)