New York Urban Professionals Soccer League

155 West 72nd Street* Suite 701* New York, NY 10023 Tel: (212) 877-3614 * Fax: (212) 721-2920

TEAM ENTRY FORM - WINTER 2018/19

TEAM NAM	ME	 			
TEAM CAP	PTAIN	 			
CAPTAIN'S	SADDRESS _	 		719	
Telephone:	Office Email	 		<u>Zn</u>	
ALTERNA	TE CAPTAIN _				
	Office Email	 	Cell		
PLAYERS					
1		 9			
2		 10			
3		 11			
4		 12			
5		 13			
6		 14			
7		 15			
8					

A team may have as many as 15 players on its roster and to insure that there are no defaults, no less than 7. 8 to 10 players is the ideal amount to provide everyone with enough playing time. The season will begin the week of December 10th, 2018. It will consist of 10 Matches, 1 Rating Scrimmage plus Divisional Playoffs. The entry fee is \$1,275 per team and includes 10 T-shirts and all Court & Referee Fees.

Dated:_____

Signature of Individual Entering Team

TEAM NAME: _____

1. Last time our team played was: (check one) Winter '18 Winter '17 Winter '16 Winter '15 Neither, We are a New team
2. Our team name was:
3. Our record was :
4. Compared to our last team we are (check one) The same a little better a little worse much better much worse
5. Compared to our last team, I think our team belongs in (check one)
The same division Up one divisionDown one division
6. Why?

7. Any <u>serious</u> scheduling problems? If so, please specify clearly below in a complete sentence: (be specific)

8. Are there any specific DATES that you can't make during the season due to Parties, Travel or Religious Holidays. If so, please list SPECIFIC DATES: _____