

SOUTH FLORIDA UNITED YOUTH SOCCER ASSOCIATION TEAM REGISTRATION FORM

Online Registration determines eligibility for all SFUYSA games and playoffs at the respective roster freeze dates. Roster freeze for league games is 24 hours prior to the game. Roster Freeze for playoffs is 30 days prior to the first playoff game scheduled for the division, or as specified by the Competition Committee's Rules of Competition. This form is completed automatically from online player registration records and is only intended to be a backup to the online system. **DO NOT FAX** it in unless the online registration system is offline and clubs have been notified to do so.

When completing the form offline, all information **MUST** be **TYPED**, it **MUST** be **SIGNED** by the Club Registrar, and **FAXED** to the SFU Registrar and Secretary within the prescribed roster freeze timeline. Club Registrars should keep copies of each amended form on file throughout the season. **ONLY** the most current, received version will be used to judge the eligibility of team participants. ***THIS IS ONLY REQUIRED WHEN THE ONLINE SYSTEM IS DOWN AND CLUBS ARE NOTIFIED TO DO SO.**

NO PLAYER MAY BE LISTED ON MORE THAN ONE SFUYSA TEAM REGISTRATION FORM CONCURRENTLY DURING THE SAME SEASON. Players may be moved between teams by filing amended team registration forms for both the team the player is moving from, to the team they are moving to. Forms without coaches' information, including licensure, will be treated as incomplete and subject to disqualification. At a minimum, all **BOLD-faced** fields must be completed and the requisite number of players declared.

Recommended maximum player registrations per team are based upon the playing format. For U9 – U10 (6 vs. 6), the maximum number of registered players should be 12. For U11 – U12 (8 vs. 8), the maximum number of registered players should be 16. For U13 and above (11 vs. 11), the maximum number of registered players should be 22.

TEAM CODE:		DIVISION:			AGE U-	BOYS <input type="checkbox"/>	GIRLS <input type="checkbox"/>
Club:					DATE:		
Head Coach:		License:	<u>Type</u>	<u>Number</u>	Phone:		
Asst. Coach:		License:	<u>Type</u>	<u>Number</u>	Phone:		
Asst. Coach:		License:	<u>Type</u>	<u>Number</u>	Phone:		

Line	PLAYER NAME (Last, First)	PASS #	Birth Date	Registered Date	Age
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					

I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT.

***Fax Numbers:**

SFU Registrar: **1-954-771-9913**

SFU Secretary: **1-866-353-7119**

SIGNATURE OF Club Registrar

**CLUB REGISTRARS MUST RETAIN ALL TEAM REGISTRATION FORMS AND FAX ACKNOWLEDGEMENTS
THROUGHOUT THE ENTIRE SEASON**