



UNITED STATES YOUTH SOCCER
SOUTH TEXAS YOUTH SOCCER ASSOCIATION



TRAVEL ROSTER

Seasonal Year: 200__ - 200__

Team Name: _____ Age Group: ____ Boys __ Girls __ Team Code: _____

Name of Coach: _____ Home Telephone: _____ Work Telephone: _____

Address: _____ City: _____ Zip _____

Name of Manager: _____ Telephone: _____

Address: _____ City: _____ Zip _____

Colors: Jersey _____ Shorts _____ Socks _____ Alternate _____

PLEASE TYPE OR PRINT USING BLACK INK.

PLAYER NAME	ID NUMBER	DATE OF BIRTH	JERSEY # OPTIONAL	For State Office Use
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				
16.				
17.				
18.				

(G) Guest / (T) Tournament Players

The maximum number of players allowed is: Under-8 - 12; Under-10 - 12; Under-11 through Under-18 - 18

I hereby certify that only the above players will be traveling with this team and that all information included is true and correct.

Signature of Coach / Manager

Signature of Association Registrar

Date