



# LONG ISLAND JUNIOR SOCCER LEAGUE

## ADD / DELETE SHEET

### ADDITIONAL PLAYER(S)

**PLEASE NOTE**  
**TO ADD U10 PLAYERS TO A TEAM THIS FORM MUST BE ACCOMPANIED WITH A PARENT SIGNATURE FORM**

CLUB NO. \_\_\_\_\_ CLUB NAME: \_\_\_\_\_ TEAM NAME: \_\_\_\_\_ AGE GROUP: (ie: B085) \_\_\_\_\_

1.	FIRST NAME	LAST NAME	PASS #	DOB	ADDRESS	TOWN	STATE	ZIP	PHONE <small>PLEASE INCLUDE AREA CODE</small>	PREVIOUS CLUB OF PLAYER ADDED <i>(IF APPLICABLE)</i>	YEAR PLAYED	DATE	CODE	LG INIT
2.														
3.														
4.														
5.														

**YOU MUST LEGIBLY FILL IN ALL INFORMATION OR YOUR PASS WILL NOT BE PROCESSED**

**PLAYER DELETES:**

1.	FIRST NAME	LAST NAME	PASS NO.	GOING TO
2.				
3.				
4.				
5.				

**MUST BE COMPLETED**

(PASS ATTACHED  
ALL LEAVING  
VOLUNTARILY)

CODES:		
I	INTRAMURAL PLAYER	\$14
N	NEW PLAYERS <small>(NEED BIRTH CERTIFICATE)</small>	\$22.50
T	TRANSFERRED PLAYER <small>(IN SEASON TRANSFER)</small> <small><i>You must follow LIJSL Registration Guidelines for tranferred players</i></small>	\$50
R	PLAYER PLAYED FOR YOU LAST TIME HE/SHE PLAYED	\$22.50
P	PLAYER PLAYED FOR ANOTHER CLUB PRIOR TO SEASONAL YEAR	\$22.50
C	IN-CLUB TRANSFER	\$5

**ADD/DELETE FOR ADULT SUPERVISORS:**

	FIRST NAME	LAST NAME	PASS NO	ADDRESS	TOWN	STATE	ZIP	PHONE NO	ADD/DROP
1.									
2.									
3.									
4.									

SIGNATURE OF REGISTRAR: \_\_\_\_\_ DATE: \_\_\_\_\_