

**Troup Titans Soccer Club**  
**Pre-Season Spring 2011 3 v 3**  
**Roster/ Registration Form**

Team Name: \_\_\_\_\_ Age: U- \_\_\_\_\_ Division: \_\_\_\_\_ Level: \_\_\_\_\_  
Team Coach: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

**TEAM CONTACT PERSON:** \_\_\_\_\_

This is the person we will contact when needed. Usually the coach, but may not always be so.

**Player 1**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Birth Date: \_\_\_\_\_  
Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: (H) \_\_\_\_\_ (Cell) \_\_\_\_\_ Alternate: \_\_\_\_\_  
Email: \_\_\_\_\_ Alternate Email: \_\_\_\_\_  
Last team played: \_\_\_\_\_

**Player 2**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Birth Date: \_\_\_\_\_  
Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_  
Last team played: \_\_\_\_\_

**Player 3**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Birth Date: \_\_\_\_\_  
Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Last team played: \_\_\_\_\_

**Player 4**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Birth Date: \_\_\_\_\_  
Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Last team played: \_\_\_\_\_

**Player 5**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Birth Date: \_\_\_\_\_  
Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Last team played: \_\_\_\_\_

**Player 6**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Birth Date: \_\_\_\_\_  
Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Last team played: \_\_\_\_\_

Please do not forget to send in a Medical Release Form, completed by each player.