



PYSC WAITING LIST REQUEST

2008



| | | | | |
|-------------------|---|---------------------------|--|------------|
| PLAYERS LAST NAME | | FIRST NAME | | MI |
| STREET ADDRESS | | | | |
| CITY | | | STATE | ZIP |
| HOME PHONE | SEX | | DATE OF BIRTH | LEAUGE AGE |
| () - | <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE | | - - | |
| EMAIL | | GRADE | SCHOOL | |
| LEAGUE USE ONLY | AGE VERIFIED YES NO | GENDER VERIFIED YES NO | BIRTH CERTIFICATE NUMBER / VERIFICATION ID | |

| | | |
|--------------|------------|---|
| FATHERS NAME | HOME PHONE | CELL PHONE |
| | () - | () - |
| ADDRESS | CITY | WORK PHONE |
| | | () - x |
| E-MAIL | OCCUPATION | LEAGUE HELP |
| | | <input type="checkbox"/> CO-COACH <input type="checkbox"/> REFEREE <input type="checkbox"/> BOARD |

| | | |
|--------------|------------|---|
| MOTHERS NAME | HOME PHONE | CELL PHONE |
| | () - | () - |
| ADDRESS | CITY | WORK PHONE |
| | | () - x |
| E-MAIL | OCCUPATION | LEAGUE HELP |
| | | <input type="checkbox"/> CO-COACH <input type="checkbox"/> REFEREE <input type="checkbox"/> BOARD |

Our goal is to get as many children playing soccer as possible. Submitting this form is in no way a guarantee of placement for the 2008 season. Players will be placed on teams by age need, and on a first come first serve basis. Waiting list dates will be date of e-mail receipt or date of postmark. Parents willing to co-coach a team will be granted priority.

All waiting list families will automatically be placed on the mailing list for next year.

Please fill in all information in word processor. Return from by mail or e-mail to the following:

PYSC
 PO Box 162
 Pulaski, WI 54162-0162

pysc@jenquins.com