

Dryden Soccer Club • 2004/05 Winter Team Registration

PLEASE PRINT CLEARLY

Team Name: _____

Primary Jersey Color: _____

Division (circle one) Boys Girls

Age Group (circle one) U19 U16 U14 U12 U10 U8

Coach Name: _____

Address: _____

Phone: (home) _____

(work) _____

(fax) _____

E-mail: _____

Manager Name: _____

Address: _____

Phone: (home) _____

(work) _____

(fax) _____

E-mail: _____

Primary contact for the team to be posted on Club website (circle one)

Coach

Manager

PLEASE be sure to list this person's email address above!

League team is entering: (ie. Lansing, Marcellus, etc.)

Attach preliminary roster.

Signature of club President (required) _____