

SIGNATURE OF REGISTRAR:\_

## LONG ISLAND JUNIOR SOCCER LEAGUE ADD / DELETE SHEET ADDITIONAL PLAYER(S)

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

CLUB NO	CLUB NAME:	TEAM NAME:								AGE GROUP: (ie: B098)					
FIRST NAME	LAST NAME	PASS #	DOB	ADDRESS	TOWN	ST	ZIP	PHONE PLEASE INCLUDE AREA CODE		EMAIL	JERSEY #	PREVIOUS CLUB OF PLAYER (IF APPLICABLE)	YEAR PLAYED	DATECOD	
PLAYER DELETES:	YOU MUST L	EGIBLY FILL	IN ALL	INFORMATION OR YOU	R PASS WIL	L NOT E	BE PRO	OCESSED	IN	TRAMURAL PLAYER	CODES TO TRAVEL P			\$25	
FIRST NAME	LAST NAME	PASS NO	0.	GOING TO	NG TO COMPLETED			MPLETED	N NEW PLAYER (NEED BIRTH CERTIFICATE) \$31  T TRANSFERRED PLAYER (10 day) \$100						
									T TRANSFERRED PLAYER (10 day) \$100 (in season transfer after club registration period)  You must follow LIJSL Registration Guidelines						
						(PASS ATTACHED			-	T TRANSFERRED PLAYER \$5					
						ALL LEAVING VOLUNTARILY)				(in season transfer during club registration period)					
										R PLAYER PLAYED FOR YOU LAST TIME HE/SHE PLAYED \$31					
										P PLAYER PLAYED FOR ANOTHER CLUB PRIOR TO SEASONAL YEAR				\$31	
										IN-CLUB TRANSFER				\$5	
ADD/DELETE FOR ADU	JLT SUPERVISORS:										PLEASE	INCLUDE AREA CO	DDE .		
FIRST NAME	LAST NAME	PASS NO		ADDRESS		TOWN	<u> </u>	ST	ZIP	PHONE NO	E	MAIL	AE	DD/DROP	
											-				

DATE: