



Revised 3-99

RECREATIONAL

Type or Print ONLY

TEAM REGISTRATION ROSTER

Read Instructions on back before completing Roster

FALL _____ SPRING _____ YR _____



| | | | | | | | |
|-----------|--------------|-----------|-----|---|---|-----|---|
| TEAM NAME | JERSEY COLOR | # PLAYERS | AGE | B | G | SEX | M |
|-----------|--------------|-----------|-----|---|---|-----|---|

| | |
|------------------|----------------------------------|
| HOME ASSOCIATION | PLAYING ASSOCIATION IF DIFFERENT |
|------------------|----------------------------------|

(ASSOCIATION WHERE TEAM REGISTERS)

(ASSOCIATION WHERE TEAM PLAYS IF NOT HOME ASSN)

| Coach etc. | Name (Last Name, First) | Sex | Address | City | Zip | Home () Phone | WK () Phone | School |
|-------------|-------------------------|-----|---------|------|-----|----------------|--------------|--------|
| Coach | | | | | | | | |
| Asst. Coach | | | | | | | | |
| Manager | | | | | | | | |
| Reg. Num. | Name (Last Name, First) | Sex | Address | City | ZIP | () Phone | DOB | School |
| 1. | | | | | | | | |
| 2. | | | | | | | | |
| 3. | | | | | | | | |
| 4. | | | | | | | | |
| 5. | | | | | | | | |
| 6. | | | | | | | | |
| 7. | | | | | | | | |
| 8. | | | | | | | | |
| 9. | | | | | | | | |
| 10. | | | | | | | | |
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| 15. | | | | | | | | |
| 16. | | | | | | | | |
| 17. | | | | | | | | |
| 18. | | | | | | | | |

I certify that the above information is true and correct. SIGNED: COACH _____ Date: _____

ASSOCIATION REGISTRAR: _____ Date: _____ Coaches License: _____

NTSSA TEAM REGISTRATION ROSTER
GENERAL INSTRUCTIONS

1. This form must be **TYPED or PRINTED**. Copy the front and back of the roster on one sheet of paper.
2. Players must be listed in **ALPHABETICAL ORDER, last name first**.
3. All information must be filled in, address, city, zip code, phone # area code (see number five, 5), birth date and school.
4. Rosters must be signed by the Home Association Registrar and the Coach of the team for this to be a legal roster. Coach must sign on front and back.
5. If all the Area Codes for phone numbers is the same just put the Area Code in the () at the top of the page, then you will not have to write it over and over. But if someone has a different area code please print it next to the phone number.
6. **Incorrectly prepared rosters will be returned by the State office and the team will not be considered properly registered until the roster is correctly prepared and returned.**

TRAVEL INSTRUCTIONS

Any team traveling outside the NTSSA boundaries to play in tournaments or friendly games (including going to South Texas) **MUST** have a State approved travel application. All soccer insurance is voided unless the approved travel application is on file with the state office.

Obtain a travel application, travel roster forms, and player I.D. cards from the NTSSA State office at least 45 days prior to the trip departure. These documents **MUST BE PROPERLY EXECUTED AND BACK IN THE STATE OFFICE 30 DAYS PRIOR TO THE TRIP DEPARTURE, ALONG WITH A \$25.00 FILING FEE, make check payable to NTSSA**. If forms are not filed with the State office on time, a penalty of **\$5.00** per day will be assessed for each day you are late up through the 15th day. The penalty must accompany the applications to be processed. No applications will be processed or approved after the 15th day. Travel outside the United States requires 90 days for processing and applications must be accompanied by a \$25.00 filing fee, make check payable to USSF.

Travel I.D. cards must be typed, cost is .25 cents per player card if your cards have been typed, signed and a photo glued to the back of card. The travel application and travel roster **MUST BE TYPED or PRINTED LEGIBLY AND THE PLAYERS LISTED ALPHABETICALLY**. Tournament sanctioning **MUST ACCOMPANY TRAVEL APPLICATION**, along with copy of your original roster signed by your registrar. If tournament rules allow for **GUEST PLAYERS**, NTSSA rules concerning guest players must be adhered to.

The travel must coincide with the current **NTSSA TEAM REGISTRATION ROSTER** and add/transfer/delete forms on file in the State office, and on file and approved by the Home Association Registrar's signature.

COACHS STATEMENT

I have read, understand, and will comply with all of the above registration and travel regulations.

COACHES SIGNATURE _____

DATE _____