Bowling Green Soccer Challenge

TOURNAMENT GUEST PLAYER ROSTER FOR OHIO YOUTH SOCCER ASSOCTION NORTH TEAMS ONLY

TOURNAMENT: **Spring 2010 _____** **Fall 2010 _____**

DATES OF TOURNAMENT: **Spring - May 1-2, 2010 _____** **Fall – August 28-29, 2010 _____**

NAME OF TOURNAMENT TEAM_____ TEAM NUMBER_____ AGE DIVISION_____

NAME OF COACH_____ ADDRESS_____ PHONE_____

CITY_____ STATE_____ ZIP_____ LEAGUE_____

NAME OF GUEST PLAYER	*NAME OF GUEST PLAYER TEAM*	*LEAGUE*	*BIRTHDATE*	*GUEST PLAYER PASS NUMBER*	*PLAYER BEING REPLACED ON TEAM LEAGUE ROSTER*
1.					
2.					
3.					

COACH / TEAM MGR. SIGNATURE_____ **DATE** _____

THIS TOURNAMENT GUEST PLAYER ROSTER IS FOR USE BY ***OHIO YOUTH SOCCER ASSOCIATION NORTH TEAMS ONLY*** TAKING GUEST PLAYERS TO THIS TOURNAMENT WHICH HAVE GIVEN WRITTEN AUTHORIZATION ON THEIR US YOUTH SOCCER TOURNAMENT SANCTION FORM FOR THE USE OF GUEST PLAYERS. THIS TOURNAMENT GUEST PLAYER ROSTER IS VALID ONLY FOR THE TOURNAMENT AND DATES INDICATED ABOVE.

INSTRUCTIONS:

1. Note: This form is for Ohio Youth Soccer Association Teams ONLY. All other teams from other state associations MUST use their respective state associations “Guest Player Form”.
2. Enter the required information in the blanks provided.
3. On the tournament and/or league roster, draw a line through the player(s) being replaced (if applicable).
4. Guest players must use the player pass from their league team.
5. The information on the player pass must match the information on the Tournament Guest Player Roster.
6. The number of copies and other requirements necessary for travel and validation of rosters for tournaments can be found in Instructions for Completion of Travel Application.

BRING TO: Bowling Green Soccer Challenge Team Check In