

YAYSL Host Site & Team Declaration Form (turn in original + 1 copy, you **must include your completed coaches list Form with this form for approval)**

Community				Year		Referee Assignor:			# teams _____ x \$125 = _____
Community Rep Name				Cell Phone		Email			Check # _____ (checks only)
Teams	Age	(GI)	Team #	Will play In Bothwell Yes or No	Can play weekday game. No or list Day of the week ?	Head Coach		Head Coach Phone Number	Head Coach Email
	8,9 10 11 12 14 15 *	-girls (B) - boys				First Name	Last Name		
1.									
2.									
3.									
4.									
5.									
6.									
7.									
8.									
9.									
10.									
11.									
12.									
13.									
14.									

* Any team carrying 1 fourteen year old must play in u-15(limit 4). Any team with 1/2 of their rostered players being 13 years or older must play u-15. Any **club team** with 1 player 12 years or older must play u-15.

** U-9/ U-10 start times **must have 1-hour increments**

*** U-11 and above **must have 1 1/2 hour increments** between start times. **Teams may play 1 double header during the season.**

Age Group	Field Name & Number to play games	List all Game times available Saturday (Not before 9am) List preferred game times 1st	List all Game times available Sunday (Not before 1pm) List preferred game times 1st
u-10 Boys		**	**
u-10 Girls			
u-11 Boys		***	***
u-11 Girls			
u-12 Boys		**	**
u-12 Girls			
u-14 Boys		**	**
u-14 Girls			
u-15 Boys		**	**
u-15 Girls			

Write special notes on scheduling: