

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

CLU	JB NO	CLUB NAME:	AGE GROUP: (ie: B095)												
	FIRST NAME	LAST NAME	PASS #	DOB	ADDRESS	TOWN	ST	ZIP	PHONE PLEASE INCLUDE AREA CODE		EMAIL	JERSEY #	PREVIOUS CLUE OF PLAYER (IF APPLICABLE	YEAR	DATECOD
5.															
PLA	YER DELETES:	YOU MUST L	EGIBLY FILL	IN ALL	INFORMATION OR YOU	UR PASS WIL	L NOT I	BE PR	OCESSED	_	TRAMURAL PLAYE			•	\$21
	FIRST NAME	LAST NAME	PASS N	0.	GOING TO	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	(PASS ATTACHED ALL LEAVING VOLUNTARILY)			N NEW PLAYER (NEED BIRTH CERTIFICATE) T TRANSFERRED PLAYER (30 da					\$29 \$100
										(in season transfer after club registration period) You must follow LIJSL Registration Guidelines					\$100
2										T TRANSFERRED PLAYER \$5					
i										(in season transfer during club registration period)					
										R PLAYER PLAYED FOR YOU LAST TIME HE/SHE PLAYED \$29					
i										P PLAYER PLAYED FOR ANOTHER CLUB PRIOR TO SEASONAL YEAR					\$29
											-CLUB TRANSFER		1		\$ 5
ADI	D/DELETE FOR ADI	ULT SUPERVISORS:										PLEASE	INCLUDE AREA C	ODE .	
	FIRST NAME	LAST NAME	PASS NO)	ADDRESS		TOWN	1	ST	ZIP	PHONE NO	E	MAIL	ΑĽ	DD/DROP
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2															
3.															
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DATE: