



New Jersey Youth Soccer

569 Abbington Rd. Suite 5

East Windsor, NJ 08520

609-490-0725

609-490-0731 (Fax)

Club Name: _____

Club Number: _____

Recreation Players

Numbers of Players for Fall 2011-2012: _____ at \$6.00 per player \$ _____

Would you like recreation membership cards for these players? Yes or No

Number of Players for Spring 2011-2012: _____ at \$6.00 per player \$ _____

(New players not playing in the Fall only)

Would you like recreation membership cards for these players? Yes or No

Payment Deadlines:

- Fall --- September 16, 2011
- Spring --- March 1, 2012 (New players not playing in the Fall only)

Please make checks payable to New Jersey Youth Soccer and send to NJYS at the address provided above.

Submit the information for your recreation players and recreation coaches by downloading a template from our website:

www.njyouthsoccer.com/regforms/datatemplate.xls

After completing the template, please submit to our office using the following email

Lorie@njyouthsoccer.com.

Please provide the contact information for your Recreation Program

	Current Information
Name	
Phone	
Address	
Town and Zip	
E-Mail	

