

UNITED STATES YOUTH SOCCER OF NEVADA

5:21:00

**KOHL'S AMERICAN CUP
(RECREATIONAL)**

THIS ROSTER MUST BE TURNED IN BY. THURSDAY . . .2:00 p.m. on NOVEMBER 1, 2007

TEAM NAME:	AGE:	TEAM #:	SEX:
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PLAYERS LAST NAMES MUST BE LISTED IN ALPHABETICAL ORDER:

PLAYER:	REGISTRATION #:	BIRTHDATE:	JERSEY #:	POSITION:
1				
2				
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16				
17				
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I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT:

Signature of Coach/Team Official

Date

MAIL OR DELIVER TO
USYSNV
5650 WEST CHARLESTON BLVD. #13
LAS VEGAS, NV 89146