



THE TWENTY-SECOND ANNUAL
WEST LOS ANGELES YOUTH CLUB
Invitational Scholarship Tournament
 APRIL 16-18, 2010

Youth Team Registration

*This form can also be completed and submitted
 online (preferred) at www.wlayc.org.*

Extended Deadline!
March 1, 2010

Team Name: _____ **Division:** _____

Organization Affiliation:
 (REQUIRED—Please check one)

- | | | | | |
|---|--------------------------------------|--|--------------------------------------|--------------------------------|
| <input type="checkbox"/> Alpine Striders | <input type="checkbox"/> MP Mustangs | <input type="checkbox"/> San Fernando | <input type="checkbox"/> VFW | <input type="checkbox"/> OTHER |
| <input type="checkbox"/> Anaheim Methodists | <input type="checkbox"/> Norwalk | <input type="checkbox"/> SOC | <input type="checkbox"/> Venice | Please specify: _____ |
| <input type="checkbox"/> Evergreen | <input type="checkbox"/> OCO | <input type="checkbox"/> South Bay FOR | <input type="checkbox"/> Wintersburg | |
| <input type="checkbox"/> Hollywood Dodgers | <input type="checkbox"/> OCBC | <input type="checkbox"/> Tigers | <input type="checkbox"/> WLAYC | |
| <input type="checkbox"/> Jets/Jetts | <input type="checkbox"/> WCSabers | <input type="checkbox"/> Pasadena Bruins | | |

Team Colors: _____ **Coach's T-Shirt Size (please circle):** M L XL XXL

Coach: _____ **Assistant Coach:** _____

Address: _____ **Address:** _____

City/Zip: _____ **City/Zip:** _____

Home Phone: _____ **Home Phone:** _____

Work Phone: _____ **Work Phone:** _____

Cell Phone: _____ **Cell Phone:** _____

E-mail: _____ **E-mail:** _____

No.	JERSEY #	NAME	BIRTHDAY	GRADE	JV/VARSITY
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

Parent Representative: _____ **E-mail:** _____

Mailing Address: _____ **City/Zip:** _____

Home Phone: _____ **Cell Phone:** _____

Submission deadline is March 1, 2010!