



EDISON BOYS' SOCCER

PLAYER/PARENT/GUARDIAN INFORMATION

Return this form to your Team Representative TONIGHT, thank you.

PLAYER INFORMATION (please write legibly!)

NAME: _____

DATE OF BIRTH: _____

ADDRESS: _____

CELL PHONE: _____

EMAIL ADDRESS _____

TEAM: VARSITY _____ JV _____ F/S _____

PLAYER SHIRT SIZE: SM _____ M _____ L _____ XL _____

Player will receive 1 Polo & 1 Game Day Warm-up "Tradition Long Sleeve" shirt.

PARENT/GUARDIAN INFORMATION (please write legibly!)

FATHER/GUARDIAN: _____

HOME PHONE: _____

CELL PHONE: _____

E-MAIL ADDRESS: _____

MOTHER/GUARDIAN: _____

HOME PHONE: _____

CELL PHONE: _____

E-MAIL ADDRESS: _____

Notes: _____

