

PLEASE SUBMIT THIS FORM WITH TWO (2) PICTURES.
POR FAVOR ENTREGAR ESTA FORMA CON DOS 2 FOTOS.

SIGNATURE _____
FIRMA _____

LEAGUE _____
LIGA _____

TEAM _____
EQUIPO _____
DIVISION _____
DIVISION _____

TELEPHONE (____) (____) _____
WORK/TRABAJO _____
HOME/CASA _____

ADDRESS _____
DOMICILIO _____
CITY/CIUDAD _____
STATE/ESTADO _____
ZIPCODE/ZONAPOSTAL _____

COACH'S NAME _____
NOMBRE DE ENTRENADOR _____



COACH ID # _____

DATE _____
FECHA _____

CALIFORNIA SOCCER ASSOCIATION, SOUTH
COACH REGISTRATION
SEASON 2007-2008

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