



NEW PLAYER QUESTIONNAIRE

(This form must be completed before a new player steps on the field)

NAME: _____

TEAM: _____

DOB: _____

TEL NO: _____

E-MAIL: _____

1) ARE YOU CURRENTLY REGISTERED IN ANY OTHER CLUB?

Yes _____ No _____ Club Name: _____

(If yes, you must be released from that club before we can speak with you.)

2) WHAT IS THE NAME OF YOUR PREVIOUS CLUB:

3) DID YOU PLAY in SFUYSA IN ANY SEASON:

Early _____ Regular _____ Mini _____ Spring _____

4) ARE YOU CURRENTLY REGISTERED WITH AYSO/644 OR

AYSO SELECT? Yes _____ No _____

5) HAVE YOU EVER PLAYED IN AN FYSA CLUB BEFORE?

Yes _____ No _____

6) ARE YOU BORN IN THE USA?

Yes _____ No _____

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FOR INTERNAL WESTON FC USE ONLY

(Applicable DOC's please sign below)

Name: _____ Signature: _____ Date: _____