DISTRICT REGISTRATION FORM

Fall _____ Spring _____

District Name _____ Dist # _____

Kickers 01, Racine 02, Metro 03, East Central 04, Madison 05, Kenosha 06, Stateline 07
Waukesha 08, Northwest 09, Southwest 12, Ozaukee 13, Midway 17

District Registrar _____

Address _____

Home # ( ) Work # ( )

Email _____

Club Name	Total # Rec Players @ $8.30 ea	Total # Classic Payers @ $10.80 ea	Total Player Count by Club	Total Amount Paid by Club
				$
				$
				$
				$
				$
				$
				$
				$
				$
				$
				$
				$
				$
				$
				$
				$
				$
				$
				$
				$
				$
				$
				$
				$
				$
				$

Date Received _____

Total amount due to WYSA $ _____

Date Paid _____ **Check #** _____

Fall Registrations due: October 1
Spring Registrations due: May 1
Summer Registration due: June 1

Make Checks Payable to "Wisconsin Youth Soccer" and mail to:
10201 W. Lincoln Ave, Suite 207 West Allis, WI 53227 - 2027

District Registrars: Please submit this form when sending player registration data disk and fees to the State Association. This form should be used to verify data and fees received from member clubs assigned to the district submitting this form. Be sure to break down player count by level (rec & classic) and fees paid by club