



5817 S. 118th E. Ave. • Tulsa, Oklahoma 74146 • Phone (918) 249-0044 • Fax (918) 249-5156

YOUTH TEAM RANKING QUESTIONNAIRE

FULL TEAM NAME: _____

AGE GROUP & LEAGUE: _____ (i.e. U10 Boys)

MANAGER'S NAME: _____

COACHES NAME: _____

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TEAM NAME used during your last outdoor session: _____

	Division: (i.e. Rec/OPL)	Record: (i.e. 4-3-1)	Final Place: (i.e. 2 nd of 6)
Spring 2005 Season			

Has your team played together before? YES NO
 If yes: Have there been any major roster changes since spring? YES NO
 State changes: _____
 If no: Has your team ever played indoor soccer? YES NO

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PLEASE LIST THE TOURNAMENTS YOUR TEAM HAS PARTICIPATED IN 2005:

Name: _____ Record/Placing: _____

Name: _____ Record/Placing: _____

Name: _____ Record/Placing: _____

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ADDITIONAL COMMENTS:

