



TEAM CHECK-IN INFORMATION FORM

Teams are to provide this form along with Referee Fees to the Local Site Coordinator (if available) about one (1) hour prior to the start of your first game of your Conference weekend competition.

Team Name: _____

State Association: _____

Gender Girls Boys
Age Group 13U 14U 15U 16U 17U 18U 19U

Conference & Division: _____

Be sure that you have brought the following:

- SportsForms Line-Up Cards for each match – **give Line-Up Card to Referee prior to each match** - provide opponent with Line-up card only upon request)
- US Youth Soccer Player Member Passes (from your state association) – **give to ref**
- Referee Report – **give to ref** (NOT needed at conference hosted weekends)
- Team State Rosters (one for each match - bring a spare in case the opponent if requests) - **do not give to ref**
- Club Pass Player State Rosters (one for each match - one for the opponent if requested) - **do not give to ref**
- Player Medical Release Forms (your local forms are acceptable) - **do not give to ref**

The following is to be turned in to the Local Site Coordinator (if applicable):

- Total Referee Fees for each game (each team is to provide the following) **IN CASH**. Ensure you have your total for the weekend and make sure the denominations requested are given exactly.

U13, U14 \$60/game **(2 twenties, 1 ten, 2 fives)**
U15, U16 \$70/game **(3 twenties, 1 ten)**
U17, U18, U19 \$80/game **(3 twenties, 1 ten, 2 fives)**

- This Check-In Information Form

Please provide Cell Phone contact information in the event that the Local Site Coordinator must contact you

Contact Person: _____ Date: _____ Cell Phone Number: _____

Signature: _____