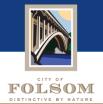
Team Application





City of Folsom - Folsom Parks & Recreation

Youth Indoor Soccer Team Application

| Season 2025-26 | Season 2025-26 - Session | | |
|---|--------------------------|---------------------|--|
| | | Registration # | |
| TEAM GENDER: GIRLS BOYS | | | |
| DIVISION: REC ACADEMY-COMP | FOLSOM: RES | SIDENT NON-RESIDENT | |
| TEAM NAME: | | AGE GROUP: | |
| MGR/COACH NAME: | _ | | |
| EMAIL ADDRESS: | | | |
| ADDRESS: | | | |
| PHONE: | | | |
| LAST YOUTH ORGANIZATION THAT YOU COACHE | | | |
| ASST COACH: | CELL: | | |
| EMAIL: | | | |
| FOR OFFICIAL USE ONLY | | | |
| TEAMS MUST HAVE ALL OF THE FORMS BELOW COMPLETED AT REGISTRATION | | | |
| TEAMO MOOT TIVE ALE OF THE FORMS BEES | W COMI LETED AT | TEGIOTIV (TICIT | |
| TEAM APPLICATION HEAD COACH TEAM REGISTRATION & RISK MANAGEMENT FORM ASST. COACH TEAM REGISTRATION & RISK MANAGEMENT FORM PAYMENT | | | |
| Received by: Da | nte: | Recieved Time: | |
| Comments: | | | |