CALGARY BLIZZARD SOCCER CLUB

PRE-FORMED TEAM APPLICATION

YEAR 20___	INDOOR	OUTDOOR

TEAM NAME

AGE GROUP		COACH	
GENDER		MANAGER	
PROPOSED DIVISION		DATE SUBMITTED	

LAST NAME	FIRST NAME	BIRTHDATE (YY MM DD)	LAST DIV PLAYED	PREVIOUS CLUB/COMMUNITY	PARENTAL/GUARDIAN SIGNATURE

Coach Signature _____

Technical Approval _____