



Team Number: _____

Name of Team: _____ Age Group: _____

This information will determine which division your team will be playing in. Please be specific when fill out this form!

Team Strength

How many years has your team played together? _____ Number of players returning? _____

Are you a school-based team OR year round team? _____

In what leagues has your team played in the past 12 months? _____

Where did your team place? _____

Where would you place your team (circle one)?

Would you consider your team to be (circle one)?

Upper Division

Skilled

Middle Division

Experienced

Lower Division

Novice

Why?

Anything else you would like PAL to know about your team?

Bye Dates Requested:

As scheduling permits we will do our best to include your request, but we **CANNOT** guarantee any bye request dates. Your team is expected to play every game that your team is scheduled for —requesting a bye date does not excuse you from play if we cannot accommodate your request.

COACHES: Please check with your players and parents regarding holidays, school events, religious events, birthday parties, weekend get-a- ways, and any other days that players may not be able to attend!

Date(s) requesting Bye:

1st Choice: _____ 2nd Choice: _____ 3rd Choice: _____

No games will be schedule April 11th the Saturday before Easter, and May 23rd the Saturday before Memorial Day.

Coach's Signature: _____ Coach's Name (please print): _____