

# Nevada South Youth Soccer League

5650 W. CHARLESTON #14, LAS VEGAS, NV 89146  
702-877-2248 | NVSYSL@AOL.COM



Date submitted \_\_\_\_/\_\_\_\_/\_\_\_\_

Coach's name: \_\_\_\_\_ Phone number \_\_ (\_\_\_\_) \_\_\_\_\_

Actual Team(s) Names:

If you have more than one team to separate, please list from the top priority to last in order:

1. \_\_\_\_\_ Division \_\_\_ Gold \_\_\_ Silver \_\_\_ Bronze (if available)

AGE GROUP REQUESTED FOR THIS TEAM \_\_\_\_\_

2. \_\_\_\_\_ Division \_\_\_ Gold \_\_\_ Silver \_\_\_ Bronze (if available)

AGE GROUP REQUESTED FOR THIS TEAM \_\_\_\_\_

3. \_\_\_\_\_ Division \_\_\_ Gold \_\_\_ Silver \_\_\_ Bronze (if available)

AGE GROUP REQUESTED FOR THIS TEAM \_\_\_\_\_

If you have a certain time that you must have you team play, please write the 4 hour period that your team is available to play:

Day \_\_\_\_\_ Monday \_\_\_\_\_ Tuesday \_\_\_\_\_ Wednesday \_\_\_\_\_ Thursday \_\_\_\_\_ Saturday

\_\_\_\_\_ am/pm to: \_\_\_\_\_ am/pm

If you need an exception weekend for a tournament or special event, please list the Dates you do not want to be scheduled for league games:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**NSYSL does not guarantee all scheduling or division requests provided on this form. We will do our absolute best to accommodate all teams.**

**All requests must be submitted into the League office in writing by: August 1<sup>st</sup>, 2018.**

**You may scan and email this request to: [NVSYSL@aol.com](mailto:NVSYSL@aol.com) or:**

**Mail or bring in to: NSYSL 5650 W. Charleston #14, Las Vegas, NV 89146**