## Palmdale Youth Soccer League

## Player Retention Form

Season: Spring 🗌 Fall 🗌	Year:
Team Name:	Team #:
Division:	
Player's Last Name:	First Name:
Player's Phone Number: ( )	
Parent's Last Name:	First Name:
Parent's Signature:	Date:
Coach's Last Name:	First Name:
Coach's Phone Number: ( )	
Coach's Signature:	Date:
Sol	ccer ague
PYSL Le	eague Use Only
Registration Date:	Division: Team #:
Registration Confirmed by:	
Retention form received Date:	Time: