

METRO TULSA Soccer Club, USC FRIENDSHIP TEAMS

Request Form for **ONLY U4-U12 Recreational Program Friendship Team** Formation

**MTsc Recreational U4-U12
FRIENDSHIP TEAM
Request Process and Requirements**

MTsc is pleased to offer like other sports the ability for friends to play with one another on the same team. MTsc is allowing parents of friends to be able to request neighborhood, church, school, etc teams to be formed to provide their children with an enhanced social environment, much improved logistics for parents and the opportunity for an even greater fun filled experience playing soccer.

FRIENDSHIP TEAM REQUEST CHECK LIST

- All players on the requested "Friendship Team" **MUST** be registered online under **RECREATIONAL PROGRAM** (plus have paid registration fees to MTsc and provided a birth certificate as required) by the Deadline.
- "Deadline" for submitting for guaranteed consideration is **NO LATER** than midnight of the MTsc Citywide registration day or other date as posted. Thereafter requests may or may not be accommodated and no refunds.

- Friendship Teams must have the minimum number of players required plus 2 (U4-U10), plus 3 (U11/12), plus 4 and no more than the maximum number of players allowed:

U4, U5, U6 – 5 to 6 U7/U8 – 6 to 8
U9/U10 – 8 to 10 U11/U12 – 11 to 14

- For Friendship Teams, relative to pure age divisions U4-U10, upon request, individual players may play up no more than one (1) age division. A U4-U10 pure aged team may play up one (1) age division upon request.

- Adds to Friendship Teams will be considered if this form is revised applicably and is resubmitted prior to the Deadline. After the Deadline and up to registration cut-off, adds of friends will be accepted only if they were not already registered and placed on an alternate team and there is space available on your team.

- Players not identified on a Friendship Team will be put on Random Draw Team.

- MTsc reserves the right to schedule U4/U5, U7/U8, and U9/U10 leagues within the same division, or Friendship Teams against Random Draw Teams or other combinations to find the best balance for optimal fun for all in a league.

The intent to this new approach to soccer for MTsc is to allow friends to play with friends. The logistics of doing so can be tremendous and therefore parent support, patience and timely assistance with the requirements above is absolutely required. It is also MTsc's intention to have divisional play depending on the number of teams relative to separate Random Draw and Friendship Team leagues and mix as appropriate in an attempt to provide the best reasonable playing experience for all.

See www.MetroTulsaSoccer.com for Deadlines

Team Name: _____

How to Request Friendship Team Formation:

1. The Parent/Guardian of each Player must complete and sign the form below. Request for Friendship Team players will not be considered without signatures.
2. This Friendship Team request form must be provided to MTsc office via the drop box no later than midnight of City-wide Registration or such later date announced by MTsc.

USE BLUE OR BLACK INK ONLY

FRIENDSHIP TEAM INFO.

Coach Information

Name _____
 Email _____
 Phone _____ Child on Team? _____
 Signature _____ Date ____ / ____ / ____

FRIENDSHIP TEAM GENDER [] MALE [] FEMALE
 TEAM AGE: [] U4 [] U5 [] U6 [] U7 [] U8 [] U9 [] U10 [] U12
LIST NAMES EXACTLY AS SHOWN ON BIRTH CERT.

PARENT MUST VERIFY WITH THEIR SIGNATURE

Player 1	Request to Play Up, Check Here []
Player Name (Print) _____	
Player Birth Date _____ \ \ Last League Played _____	
Parent/Guardian (Print) _____	
Parent/Guardian Signature _____	
Player 2	Request to Play Up, Check Here []
Player Name (Print) _____	
Player Birth Date _____ \ \ Last League Played _____	
Parent/Guardian (Print) _____	
Parent/Guardian Signature _____	
Player 3	Request to Play Up, Check Here []
Player Name (Print) _____	
Player Birth Date _____ \ \ Last League Played _____	
Parent/Guardian (Print) _____	
Parent/Guardian Signature _____	
Player 4	Request to Play Up, Check Here []
Player Name (Print) _____	
Player Birth Date _____ \ \ Last League Played _____	
Parent/Guardian (Print) _____	
Parent/Guardian Signature _____	
Player 5	Request to Play Up, Check Here []
Player Name (Print) _____	
Player Birth Date _____ \ \ Last League Played _____	
Parent/Guardian (Print) _____	
Parent/Guardian Signature _____	
Player 6	Request to Play Up, Check Here []
Player Name (Print) _____	
Player Birth Date _____ \ \ Last League Played _____	
Parent/Guardian (Print) _____	
Parent/Guardian Signature _____	

USE BLUE OR BLANK INK ONLY

LIST NAMES EXACTLY AS SHOWN ON BIRTH CERT.

STOP – MAXIMUM for U4, U5 & U6

Complete Proposed Coach Info. Below

Player 7	Request to Play Up, Check Here []
Player Name (Print) _____	
Player Birth Date _____ \ \	Last League Played _____
Parent/Guardian (Print) _____	
Parent/Guardian Signature _____	

STOP – MAXIMUM for U7 & U8

Complete Proposed Coach Info. Below

Player 9	Request to Play Up, Check Here []
Player Name (Print) _____	
Player Birth Date _____ \ \	Last League Played _____
Parent/Guardian (Print) _____	
Parent/Guardian Signature _____	

STOP – MAXIMUM for U9 & U10

Complete Proposed Coach Info. Below

Player 11	Request to Play Up, Check Here []
Player Name (Print) _____	
Player Birth Date _____ \ \	Last League Played _____
Parent/Guardian (Print) _____	
Parent/Guardian Signature _____	

Player 13 Request to Play Up, Check Here []

Player Name (Print) _____	
Player Birth Date _____ \ \	Last League Played _____
Parent/Guardian (Print) _____	
Parent/Guardian Signature _____	

STOP – MAXIMUM for U11 & U12

Complete Proposed Coach Info. Below

Assistant Coach

Name _____	
Email _____	
Phone _____	Child on Team? _____
Signature _____	Date / / _____

Team Self Capability Assessment (please check one)

[] Low [] Medium [] High

This will assist us with appropriate leaguings

STOP – MAXIMUM for U4, U5 & U6

Complete Proposed Coach Info. Below

Player 8	Request to Play Up, Check Here []
Player Name (Print) _____	
Player Birth Date _____ \ \	Last League Played _____
Parent/Guardian (Print) _____	
Parent/Guardian Signature _____	

STOP – MAXIMUM for U7 & U8

Complete Proposed Coach Info. Below

Player 10	Request to Play Up, Check Here []
Player Name (Print) _____	
Player Birth Date _____ \ \	Last League Played _____
Parent/Guardian (Print) _____	
Parent/Guardian Signature _____	

STOP – MAXIMUM for U9 & U10

Complete Proposed Coach Info. Below

Player 12	Request to Play Up, Check Here []
Player Name (Print) _____	
Player Birth Date _____ \ \	Last League Played _____
Parent/Guardian (Print) _____	
Parent/Guardian Signature _____	

Player 14 Request to Play Up, Check Here []

Player Name (Print) _____	
Player Birth Date _____ \ \	Last League Played _____
Parent/Guardian (Print) _____	
Parent/Guardian Signature _____	

STOP – MAXIMUM for U11 & U12

Complete Proposed Coach Info. Below

Team Parent

Name _____	
Email _____	
Phone _____	_____
Signature _____	Date / / _____

Request for Team to Play Up (Entire Team Must be Pure Age) – Applies to U4-U10 ONLY

If Yes, **MUST** Check Here []