



Cincinnati East S.A.Y.
 Soccer Association
 www.cincinnatiestsay.org

**Form #103
 Player Pool
 "The Green Sheet"**

Cincinnati East SAY Soccer
Request for Players from Placement Pool

Form submission date: ___/___/___
 SAY District (school/neighborhood): _____
 District Representative: _____
 Phone (h) ___-___ (w) ___-___ E-mail: _____

Circle or complete correct information:

Spring Fall Year: 20___
 Boys Girls
 Passers Wings Strikers Kickers
 6 & 7 8 & 9 10 & 11 12 & 13

Name Street address Zip Phone E-mail

Coach: _____

Players Requested (indicate number of players at age requested):

___ 6 year olds ___ 8 year olds ___ 10 year olds ___ 12 year olds
 ___ 7 year olds ___ 9 year olds ___ 11 year olds ___ 13 year olds

Placement Pool action: _____

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