



AYSO REGION 24 UNIFORM AGREEMENT

Child's Name:			
Division:	<input type="checkbox"/> Boys	<input type="checkbox"/> Girls	Age in August:
Parent's Name:			
Phone:			
Email:			

I, _____, would like to have the following uniform sizes for my son/daughter as indicated below. I understand that any uniform changes or the issuance of a new uniform will be handled by the region. A \$25.00 charge will be due at the time of ordering in the event the uniform is lost, stolen or damaged beyond repair. The uniform will be used during the fall season starting in September, so please size accordingly.

Uniform Selection – Jersey, Shorts & Socks

- | | |
|---|---|
| <input type="checkbox"/> Youth XX Small (YXXS) if available | <input type="checkbox"/> Adult Small (AS) |
| <input type="checkbox"/> Youth Extra Small (YXS) | <input type="checkbox"/> Adult Medium (AM) |
| <input type="checkbox"/> Youth Small (YS) | <input type="checkbox"/> Adult Large (AL) |
| <input type="checkbox"/> Youth Medium (YM) | <input type="checkbox"/> Adult Extra Large (AXL) |
| <input type="checkbox"/> Youth Large (YL) | <input type="checkbox"/> Adult 2-Extra Large (AXXL) |

Parent Name: _____ Date: _____

Help us reach our goal of a successful AYSO Soccer Season. Please return this form with your registration form(s). Thank you.