

# 2019 OHIO TRAVEL SOCCER LEAGUE

## ALL STAR GAMES

### NOMINATION FORM



Community \_\_\_\_\_

Age of Play (circle one) : 2004                      2005

Division of Play (circle one) : D1   D2   D3   D4   D5   D6   9 v 9   EAST   WEST

Gender (circle one):   GIRLS   BOYS

Coach Name \_\_\_\_\_

Coach Email Address \_\_\_\_\_

Coach Phone # \_\_\_\_\_

Interest in Coaching All Star Game (circle one): YES   NO

Player #1 Name \_\_\_\_\_

Player #1 Position \_\_\_\_\_

Player #1 Parent Name(s) \_\_\_\_\_

Player #1 Parent Email Address(es) \_\_\_\_\_

Player #1 Parent Phone #(s) \_\_\_\_\_

Alternate Name \_\_\_\_\_

Alternate Position \_\_\_\_\_

Alternate Parent Name(s) \_\_\_\_\_

Player #2 Parent Email Address(es) \_\_\_\_\_

Player #2 Parent Phone #(s) \_\_\_\_\_

**\*NOTE THAT THE ALTERNATE WILL ONLY PARTICIPATE IF PLAYER #1 IS UNAVAILABLE TO PARTICIPATE OR IF WE DETERMINE MORE PLAYERS ARE NEEDED\***