WILSON COUNTY YOUTH ATHLETIC ASSOCIATION

101 North Main Street/P.O. Box 10, Lucama, N.C., 27851
239-0652 (office) 239-1840 (fax) 230-2467 (cell)

TEAM NAME:_____

HEAD COACH:_____ PHONE #_____
ASST. COACH:_____ PHONE #_____
ASST. COACH:_____ PHONE #_____
ASST. COACH:_____ PHONE #_____
ASST. COACH:_____ PHONE #_____
ASST. COACH:_____ PHONE #_____

PLAYER'S NAME:	ADDRESS	PHONE	CITY RESIDENT Y/N	OUT OF COUNTY Y/N

OUT OF COUNTY RESIDENTS MUST PAY $5.00 EXTRA REGISTRATION FEE.

ALL COACHES MUST BE CERTIFIED BY THE W.C.Y.A.A. TO HELP IN GAME SITUATIONS.

SCOREKEEPERS DO NOT HAVE TO BE CERTIFIED.