



**SAYAREA REPORT FORM**  
**FINAL RECONCILIATION**  
**SOCCER ASSOCIATION FOR YOUTH**  
 One North Commerce Park Drive, Suite 306-320  
 Cincinnati, OH 45215  
 800-233-7291 513-769-3800 Fax: 513-769-0500  
 www.saysoccer.org



**INSTRUCTIONS ON THE BACK**

Name of SAYArea \_\_\_\_\_ Season \_\_\_\_\_ Year \_\_\_\_\_

Name and Title \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

**BREAKDOWN BY AGE GROUPS**

<b>PRE-PAID NEW PLAYERS</b> <small>(w/ Team Packet Order Form)</small>	<b>NUMBER OF TEAMS</b>		<b>FINAL NUMBER OF NEW PLAYERS</b>
	<small>Short-Sided (9 v 9 and under)</small>	<small>Full Sided (11 v 11)</small>	
_____ Preschool (U-6)	_____	_____	_____
_____ Passers (U-8)	_____	_____	_____
_____ Wings (U-10)	_____	_____	_____
_____ Strikers (U-12)	_____	_____	_____
_____ Kickers (U-14)	_____	_____	_____
_____ Minors (U-16)	_____	_____	_____
_____ Seniors (U-19)	_____	_____	_____
<b>(a) TOTAL</b>			<b>(b)</b>

**SAYAREA INFORMATION**

**Total Number of Players in Current Season** \_\_\_\_\_

- Total Final NEW regular players for the current year (b) \_\_\_\_\_ X \$9.00 player fee = \$ \_\_\_\_\_ (1)
- Total Pre-Paid New players for the current year (a) \_\_\_\_\_ X \$9.00 player fee = \$ \_\_\_\_\_ (2)
- Subtract Line 2 from Line 1. . . . . = \$ \_\_\_\_\_ (3)
- If Line 3 is positive Include a Check # \_\_\_\_\_ & send to the National Office
- If Line 3 is negative Credit is due your SAYArea  Send a Check  Credit Account

**\*\*\* MUST ACCOMPANY FINAL ROSTERS \*\*\*\***