

# SoccerWeen Application

Bay Area Soccer Association (BASA)  
Bay City, Michigan  
[www.basasoccer.com](http://www.basasoccer.com)

## Contact Information

Team Name	
Gender and Age	
Travel League Name	
Current Age Group	
Coach's Name	
Coach's Email	
Coach's Phone #	
Team Contact Person	
Contact Person Phone #	
E-Mail Address	

## Payment

Please print this application and send it with your check to:

Bay Area Soccer Association  
**Attn: Soccerween**  
P.O. Box 1397  
Bay City, MI 48706-0397

An email will be sent to the email address listed when your team has been accepted.

U-9 and U-10 plays 6v6 Fee \$150    U-11 and U-12 plays 8v8 Fee \$180    U-13 and U-14 plays 11v11 Fee \$240

## SoccerWeen Director

soccerween@gmail.com

