UNITED STATES YOUTH SOCCER ASSOCIATION INC.
REGION II OLYMPIC DEVELOPMENT PROGRAM

PASTE PHOTO HERE

INDIVIDUAL PLAYER PROFILE

[Please print carefully—data from this form will be used to communicate with you and must be accurate and complete!]

PERSONAL

NAME: _____ DATE OF BIRTH: _____/_____/_____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

EMAIL: _____ HOME PHONE: (_____)_____

PARENT'S NAME: _____ WORK PHONE: (_____)_____

PLACE OF BIRTH: _____ U.S. CITIZEN? YES ( ) NO ( )

PASSPORT? YES ( ) NO ( ) SIZES: (S, M, L, XL) Jersey _____ Shorts _____

NEAREST MAJOR AIRPORT TO YOUR HOME: _____

NEAREST MAJOR AIRPORT TO YOUR COLLEGE: (If applicable) _____

LOCAL NEWSPAPER: _____ CONTACT: _____

MAILING ADDRESS: _____ PHONE: (_____)_____ FAX: (_____)_____

ACADEMIC

HIGH SCHOOL: _____ GRADE: _____ YEAR OF H.S. GRADUATION _____

GRADE POINT AVERAGE: ____ SAT VERBAL: _____ MATH: _____ SAT COMPOSITE: _____ ACT: _____

ARE YOU ATTENDING SCHOOL AWAY FROM HOME?YES ( ) NO ( ) IF YES, GIVE ADDRESS AT SCHOOL.

NAME OF SCHOOL:_____ CITY: _____ STATE: _____ ZIP: _____

SPECIAL SCHOOL RELATED ACTIVITIES (NON-ATHLETIC) _____

INTERESTED AREAS OF COLLEGE STUDY: 1st CHOICE: _____ 2ND CHOICE: _____

SOCCER BACKGROUND

USSF/USYSA ODP – Give last 2 digits of year(s) you participated at each level + "C" if you were team captain.

STATE TEAM: _____ REGIONAL POOL: _____

REGIONAL TEAM: _____ NAT. POOL/TEAM: _____

POSITIONS PLAYED: PRIMARY _____ SECONDARY _____

STATE ASSOCIATION: _____ STATE TEAM COACH: _____

USYSA CLUB TEAM

NAME OF CLUB: _____ # OF YEARS: _____ POSITIONS PLAYED: _____

CLUB TEAM COACH: _____ HOME PHONE: (_____)_____

HIGH SCHOOL TEAM

YEARS OF EXPERIENCE – JV: _____ VARSITY: _____ POSITIONS PLAYED: _____

HIGH SCHOOL COACH: _____ HOME PHONE: (_____)_____

COLLEGE TEAM

NAME OF COLLEGE: _____ YEAR ENTERED AS FRESHMAN: _____

COLLEGE COACH: _____ HOME PHONE: (_____)_____

I hereby give my permission for the Regional/National Administrator to provide this information to any college coach upon written request.

Player's Signature _____Date: _____ Parent's Signature _____ Date: _____