



Type or Print ONLY

ACADEMY TOURNAMENT ROSTER

Team Registration Roster

Seasonal Year: 2025/2026

Only true age 7U to 10U players
are eligible for NTSSA academy.
6U and younger are not permitted



Full Team Name	Jersey Color	# of Players by Gender	Age Group	Team Gender
		B _____ G _____	_____ U	B ____ G ____

Please Type or Print in Black Ink.

Players are to be listed in Alphabetical Order by last name.

Registration # should match player ID card or use ID number from Tournament event.

Tournament Name: _____

Dates: _____ Tournament Location (City,State)* _____

Any adult listed must have a valid Background Check and Safesport completed for the current soccer year with NTSSA in GotSport

Travel Permission required for any tournament outside of NTSSA boundaries. Email travelandguestplayers@ntxsoccer.org with any travel questions

Name (Last, First)	Sex	Address	City	Zip	Phone	DOB	Email Address
Coach*							
Asst. Coach*							
Manager*							

Name (Last Name, First)	DOB Month/Year	Sex	Jersey #	City	State
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					

I certify that the above information is true and correct. Coach Signature: _____ Date: _____

Name of NTSSA Association: _____ NTSSA Association Registrar Signature: _____ Date: _____