

## To Be Completed by the Club Contact

### OKLAHOMA PREMIER LEAGUE CLUB INFORMATION FORM

Please make sure that all questions are completed on this form. Please print legibly or type. Once the form is completed return it to the Oklahoma Soccer Association.

**FAX: (918) 627-2693    MAIL: OSA, PO BOX 35174, TULSA, OK 74153**

Club Name \_\_\_\_\_

Club Address (Street Address) \_\_\_\_\_

Club Phone Number (\_\_\_\_\_) \_\_\_\_\_ Club Fax Number (\_\_\_\_\_) \_\_\_\_\_

Rainout Number (In Case Games Are Cancelled) (\_\_\_\_\_) \_\_\_\_\_

Club Email (Print Clearly) \_\_\_\_\_

Club Website \_\_\_\_\_

**Club Contact & Title** \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_

Work Phone (If Available) (\_\_\_\_\_) \_\_\_\_\_

Cell Phone (\_\_\_\_\_) \_\_\_\_\_

Email (Print Clearly) \_\_\_\_\_

Field Assignor \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_

Work Phone (If Available) (\_\_\_\_\_) \_\_\_\_\_

Cell Phone (\_\_\_\_\_) \_\_\_\_\_

Email (Print Clearly) \_\_\_\_\_

Referee Assignor \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_

Work Phone (If Available) (\_\_\_\_\_) \_\_\_\_\_

Cell Phone (\_\_\_\_\_) \_\_\_\_\_

Email (Print Clearly) \_\_\_\_\_

Director of Coaching (If applicable) \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_

Work Phone (If Available) (\_\_\_\_\_) \_\_\_\_\_

Cell Phone (\_\_\_\_\_) \_\_\_\_\_

Email (Print Clearly) \_\_\_\_\_

