



CATHOLIC YOUTH ORGANIZATION

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ADD/DROP/REPLACEMENT FORM

Please Print Clearly

SPORT

Volleyball Soccer Flag Football Basketball Track Softball Baseball

DIVISION

AGE GROUP

Tot Tiny PeeWee Mite Cub 1st Year 2nd Year
 Boys Girls Co-ed

TEAM INFORMATION

Parish/
School: _____

Team Name: _____

Coach: _____

Date: _____

ADD THE FOLLOWING PLAYERS

**Parish & School # must correspond with the #'s on the Parish/School letter*

1. Name: _____ D.O.B: _____

Address: _____ Phone #: _____
Street City Zip

2. Name: _____ D.O.B: _____

Address: _____ Phone #: _____
Street City Zip

DROP THE FOLLOWING PLAYERS

***If parent signature can't be obtained, please have Priest/Principal sign:*

1. Name: _____ Reason: _____

Parent: _____
Printed Name Signature

Priest/Principal Signature**: _____

2. Name: _____ Reason: _____

Parent: _____
Printed Name Signature

Priest/Principal Signature**: _____

Please note: Incomplete/incorrect forms will be considered invalid, which will result in an illegal player. Registrar's and President's Signatures are only needed when dropping players.

Parish/School Registrar Signature/Date

Parish/School President Signature/Date