

FOOTBALL DIVISION

2016 SEASON POINTS

FIRST NAME											MIDDLE NAME																
LAST NA	AME																				T/	ASO I	D # (I	REQU	IRED)		
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HOME PHONE NUMBER																											
ONLY ENTER PHONES, ADDRESS OR E-MAIL IF IT IS DIFFERENT FROM LAST YEAR																											
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I certify that this information is true and correct and understand that TASO may verify all or any portion of this application, including nationwide background criminal searches.

Member Signature Date