

# ALL AMERICAN INDOOR SPORTS, INC

## WINTER 2011/2012 YOUTH TEAM QUESTIONNAIRE

**FULL TEAM NAME:** \_\_\_\_\_

**AGE/SEX:** \_\_\_\_\_ (U7,U8,U9,U10,U11,U12,U13,U14,U15,U16,U17,U18,U19 Boys/Girls)

**MANAGER'S NAME:** \_\_\_\_\_

**COACHES NAME:** \_\_\_\_\_

<b>TEAM NAME</b> used during your last outdoor session: _____		
<b>TEAM NUMBER</b> used during your last outdoor session: _____		
Which association did you play with during your outdoor session: _____		
ex: Heartland		
<b>Division played:</b> ex: <i>Pre/Rec</i>	<b>Overall Record:</b> ex: <i>4-3-1</i>	<b>Final Place:</b> ex: <i>6th of 12</i>
Spring outdoor 2011		
Fall outdoor 2011		
What grade are your players currently in? _____		
Has your team played together before?	YES	NO
Did your team play at All American during our 2010/2011 winter sessions?	YES	NO
If yes: Have there been any major roster changes since winter?	YES	NO
List changes: _____		
If no: Has your team ever played indoor soccer?	YES	NO

PLEASE LIST THE TOURNAMENTS YOUR TEAM HAS PARTICIPATED IN 2011:	
Name: _____	Record/Placing: _____
Name: _____	Record/Placing: _____

Did your team hold tryouts?	YES	NO
Is your coach paid for coaching?	YES	NO
How days per week does your team practice?                      1, 2, 3, 4, 5, 6, 7		

PLEASE LIST THE NAME OF THE TEAMS IN YOUR AGE GROUP WITH SIMILAR SKILL: (PLEASE LIST FULL TEAM NAME)	

<b>ADDITIONAL COMMENTS:</b>