



Essais 2019-2020 Tryouts Information (Joueur/Player)



Nom/Name: _____

Date de naissance/date of birth: _____

Adresse/Address: _____

City/Ville : _____ Postal Code/Code Postale : _____

Téléphone/phone: _____

Courriel/E-mail: _____

Club 2019 Club: _____

Equipe 2019 Team: _____

Position: 1st choice _____ 2nd choice _____

Parent (signature): _____

CLUB DE SOCCER *LAKESHORE* Soccer Club

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