

**2009-2010 C.Y.A.A.  
MEMBERSHIP CONTRACT**

PLEASE FILL IN FORM BELOW AND RETURN BY **September 18, 2009**

\_\_\_\_\_  
Name of School

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City

\_\_\_\_\_  
Zip

\*\*\*\*\*

Contracted General League Fee ----- \$ 450.00

\_\_\_\_\_  
Principal Signature

Contracted General Fee \$ 450.00

\_\_\_\_\_  
Date

Total \$ \_\_\_\_\_

Please remit GENERAL FEE by **September 18, 2009**. Make check(s) payable to C.Y.A.A. and mail this form with your check to:

**Catholic Schools Office  
Attn: CYAA  
400 E. Monroe Street  
Phoenix, AZ 85004**

**C.Y.A.A.**  
**Catholic Youth Athletic Association**  
Fall Sports  
Registration Card

School \_\_\_\_\_

Address \_\_\_\_\_

Zip \_\_\_\_\_ School Phone # \_\_\_\_\_

Our school will participate in:                    **Boys 2009-2010 Flag Football**

# of Teams \_\_\_\_\_ 7<sup>th</sup> & 8<sup>th</sup>

# of Teams \_\_\_\_\_ 5<sup>th</sup> & 6<sup>th</sup>

Principal Signature: \_\_\_\_\_

Bring this form along with your rosters to the Fall Sports League Scheduling Meeting **7<sup>th</sup> and 8<sup>th</sup>** grades at 4:00 pm on Monday, August 24, 2009, at St. Thomas the Apostle School. **5<sup>th</sup> and 6<sup>th</sup>** grades at 4:30 pm on Monday, August 24, 2009 at St. Thomas the Apostle School... or fax or email this form to:

Gary Coffman  
Email: [gcoffman@diocesephoenix.org](mailto:gcoffman@diocesephoenix.org)  
Fax Number: (602) 381-3256

**C.Y.A.A.**  
**Catholic Youth Athletic Association**  
Fall Sports  
Registration Card

School \_\_\_\_\_

Address \_\_\_\_\_

Zip \_\_\_\_\_ School Phone # \_\_\_\_\_

Our school will participate in: **Girls 2009-2010 Volleyball**

# of Teams \_\_\_\_\_ 7th & 8th

# of Teams \_\_\_\_\_ 5th & 6th

Principal Signature: \_\_\_\_\_

Bring this form along with your roster to the Fall Sports League Scheduling Meeting **7<sup>th</sup> and 8<sup>th</sup>** grades at 4:00 pm on Tuesday, August 25, 2008 at St. Agnes School. **5<sup>th</sup> and 6<sup>th</sup>** grades at 4:30 pm, Tuesday, August 25, 2009 at St. Agnes School ... or fax or email this form to:

Vincent Rasole

Email: [mentorvinny@yahoo.com](mailto:mentorvinny@yahoo.com)

Fax Number: (602) 354-2339

**C.Y.A.A.**  
**Catholic Youth Athletic Association**  
Winter Sports  
Registration Card

School \_\_\_\_\_

Address \_\_\_\_\_

Zip \_\_\_\_\_ School Phone # \_\_\_\_\_

Our school will participate in:                    **Boys 2009-2010 Basketball**

# of Teams \_\_\_\_\_ 7th & 8th

# of Teams \_\_\_\_\_ 5th & 6th

Principal Signature: \_\_\_\_\_

Bring this form along with your rosters to the Winter Sports League Scheduling Meeting **7<sup>th</sup> and 8<sup>th</sup>** grades at 4:00 pm on Monday, November 9, 2009 at St. Thomas the Apostle School. **5<sup>th</sup> and 6<sup>th</sup>** grades at 4:30 pm on Monday, November 9, 2009 at St. Thomas the Apostle School...or fax or email this form to:

Gary Coffman  
Email: [gcoffman@diocesephoenix.org](mailto:gcoffman@diocesephoenix.org)  
Fax Number: (602) 381-3256

**C.Y.A.A.**  
**Catholic Youth Athletic Association**  
Winter Sports  
Registration Card

School \_\_\_\_\_

Address \_\_\_\_\_

Zip \_\_\_\_\_ School Phone # \_\_\_\_\_

Our school will participate in:                    **Girls 2009-2010 Softball**

# of Teams \_\_\_\_\_ 7th & 8th

# of Teams \_\_\_\_\_ 5th & 6th

Principal Signature: \_\_\_\_\_

Bring this form along with your roster to the Winter Sports League Scheduling Meeting **7<sup>th</sup> and 8<sup>th</sup>** grades at 4:00 pm on Tuesday, November 10, 2009 at St. Agnes School. **5<sup>th</sup> and 6<sup>th</sup>** grades at 4:30 pm, Tuesday, November 10, 2009 at St. Agnes School ... or fax or email this form to:

Vincent Rasole  
Email: mentorvinny@yahoo.com  
Fax Number: (602) 354-2339

**C.Y.A.A.**  
**Catholic Youth Athletic Association**  
Spring Sports  
Registration Card

School \_\_\_\_\_

Address \_\_\_\_\_

Zip \_\_\_\_\_ School Phone # \_\_\_\_\_

Our school will participate in:                    **Boys 2009-2010 Baseball**

# of Teams \_\_\_\_\_ 7th & 8th

# of Teams \_\_\_\_\_ 5th & 6th

Principal Signature: \_\_\_\_\_

Bring this form along with your rosters to the Spring Sports League Scheduling Meeting **7<sup>th</sup> and 8<sup>th</sup>** grades at 4:00 pm on Monday, February 8, 2010 at St. Thomas the Apostle School. **5<sup>th</sup> and 6<sup>th</sup>** grades at 4:30 pm on Monday, February 8, 2010 at St. Thomas the Apostle School... or fax or email this form to:

Gary Coffman  
Email: [gcoffman@diocesephoenix.org](mailto:gcoffman@diocesephoenix.org)  
Fax Number: (602) 381-3256

**C.Y.A.A.**  
**Catholic Youth Athletic Association**  
Spring Sports  
Registration Card

School \_\_\_\_\_

Address \_\_\_\_\_

Zip \_\_\_\_\_ School Phone # \_\_\_\_\_

Our school will participate in:                    **Girls 2009-2010 Basketball**

# of Teams \_\_\_\_\_ 7th & 8th

# of Teams \_\_\_\_\_ 5th & 6th

Principal Signature: \_\_\_\_\_

Bring this form along with your roster to the Spring Sports League Scheduling Meeting **7<sup>th</sup> and 8<sup>th</sup>** grades at 4:00 pm on February 9, 2010 at St. Agnes School. **5<sup>th</sup> and 6<sup>th</sup>** grades at 4:30 pm, Tuesday, February 9, 2010 at St. Agnes School ... or fax or email this form to:

Vincent Rasole  
Email: [mentorvinny@yahoo.com](mailto:mentorvinny@yahoo.com)  
Fax Number: (602) 354-2339

**C.Y.A.A.**  
**Catholic Youth Athletic Association**  
Fall Sports  
**Number of Teams Entering into Boys' Flag Football Tournament**

School \_\_\_\_\_

School Phone # \_\_\_\_\_

Number of Teams we will enter into tournament:

**Boys 2009-2010 Football**

# of Teams \_\_\_\_\_ 7th & 8th

Principal Signature: \_\_\_\_\_

Email this form along with Roster; Grade Level; Coaches names and cell phone numbers; win/loss record; and best team played to: [gcoffman@diocesephoenix.org](mailto:gcoffman@diocesephoenix.org) no later than Monday, October 5, 2009 or fax to (602) 381-3256.

**Please remit \$175.00 per team** entered in the Boys Flag Football Tournament along with a copy of this form and your check to:

**Catholic Schools Office**  
**Attn: CYAA**  
**400 E. Monroe St.**  
**Phoenix, AZ 85004**

**C.Y.A.A.**  
**Catholic Youth Athletic Association**  
Fall Sports  
**Number of Teams Entering into Girls' Volleyball Tournament**

School \_\_\_\_\_

School Phone # \_\_\_\_\_

Number of Teams we will enter into tournament:

**Girls 2009-2010 Volleyball**

# of Teams \_\_\_\_\_ 7th & 8th

Principal Signature: \_\_\_\_\_

Email this form along with Roster; Grade Level; Coaches names and cell phone numbers; win/loss record; and best team played to: mentorvinny@yahoo.com no later than Monday, October 5, 2009 or fax to (602) 354-2339

**Please remit \$175.00 per team** entered in the Girls Volleyball Tournament along with a copy of this form and your check to:

**Catholic Schools Office**  
**Attn: CYAA**  
**400 E. Monroe St.**  
**Phoenix, AZ 85004**

**C.Y.A.A.**  
**Catholic Youth Athletic Association**  
Winter Sports  
**Number of Teams Entering into Boys' Basketball Tournament**

School \_\_\_\_\_

School Phone # \_\_\_\_\_

Number of Teams we will enter into tournament:

**Boys 2009-2010 Basketball**

# of Teams \_\_\_\_\_ 7th & 8th

Principal Signature: \_\_\_\_\_

Email this form along with Roster; Grade Level; Coaches names and cell phone numbers; win/loss record; and best team played to: [gcoffman@diocesephoenix.org](mailto:gcoffman@diocesephoenix.org) no later than Monday, January 11, 2010 or fax to (602) 381-3256.

**Please remit \$175.00 per team** entered in the Boys Basketball Tournament along with a copy of this form and your check to:

**Catholic Schools Office**  
**Attn: CYAA**  
**400 E. Monroe St.**  
**Phoenix, AZ 85004**

**C.Y.A.A.**  
**Catholic Youth Athletic Association**  
Winter Sports  
**Number of Teams Entering into Girls' Softball Tournament**

School \_\_\_\_\_

School Phone # \_\_\_\_\_

Number of Teams we will enter into tournament:

**Girls 2009-2010 Softball**

# of Teams \_\_\_\_\_ 7th & 8th

Principal Signature: \_\_\_\_\_

Email this form along with Roster; Grade Level; Coaches names and cell phone numbers; win/loss record; and best team played to: mentorvinny@yahoo.com no later than Monday, January 11, 2010 or fax to (602) 354-2339

**Please remit \$175.00 per team** entered in the Girls Softball Tournament along with a copy of this form and your check to:

**Catholic Schools Office**  
**Attn: CYAA**  
**400 E. Monroe St.**  
**Phoenix, AZ 85004**

**C.Y.A.A.**  
**Catholic Youth Athletic Association**  
Spring Sports  
**Number of Teams Entering into Boys' Baseball Tournament**

School \_\_\_\_\_

School Phone \_\_\_\_\_

Number of Teams we will enter into tournament:

**Boys 2009-2010 Baseball**

# of Teams \_\_\_\_\_ 7th & 8th

Principal Signature: \_\_\_\_\_

Email this form along with Roster; Grade Level; Coaches names and cell phone numbers; win/loss record; and best team played to: gcoffman@diocesephoenix.org no later than Monday, March 29, 2010, or fax to (602) 381-3256.

**Please remit \$175.00 per team** entered in the Boys Baseball Tournament along with a copy of this form and your check to:

**Catholic Schools Office**  
**Attn: CYAA**  
**400 E. Monroe St.**  
**Phoenix, AZ 85004**

**C.Y.A.A.**  
**Catholic Youth Athletic Association**  
Spring Sports  
**Number of Teams Entering into Girls' Basketball Tournament**

School \_\_\_\_\_

School Phone # \_\_\_\_\_

Number of Teams we will enter into tournament:

**Girls 2009-2010 Basketball**

# of Teams \_\_\_\_\_ 7th & 8th

Principal Signature: \_\_\_\_\_

Email this form along with Roster; Grade Level; Coaches names and cell phone numbers; win/loss record; and best team played to: mentorvinny@yahoo.com no later than Monday, March 29, 2010 or fax to (602) 354-2339

**Please remit \$175.00 per team** entered in the Girls Basketball Tournament along with a copy of this form and your check to:

**Catholic Schools Office**  
**Attn: CYAA**  
**400 E. Monroe St.**  
**Phoenix, AZ 85004**

**C.Y.A.A.**  
**CATHOLIC YOUTH ATHLETIC ASSOCIATION**  
**BOYS 2009-2010 SPORTS ROSTER**  
**5th & 6th**

         **Football (Aug. 24)**  
         **Basketball (Nov. 9)**  
         **Baseball (Feb. 8)**

**One form per team**  
**(PLEASE PRINT)**

SCHOOL \_\_\_\_\_ ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE# \_\_\_\_\_

Names, Birth dates and Grades on this Roster have been verified as correct. (All listed students are enrolled in above named school).

Principal Signature \_\_\_\_\_ Date \_\_\_\_\_ Athletic Director Signature \_\_\_\_\_ Date \_\_\_\_\_

LAST NAME	FIRST NAME	GRADE	PLAYER NUMBER
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**DUE TO CYAA ATHLETIC DIRECTOR BY THE DATES LISTED ABOVE**

\_\_\_\_\_  
Head Coach

\_\_\_\_\_  
Assistant Coach

LAST NAME	FIRST NAME	GRADE	PLAYER NUMBER
14.			
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**C.Y.A.A.**  
**CATHOLIC YOUTH ATHLETIC ASSOCIATION**  
**BOYS 2009-2010 SPORTS ROSTER**  
**7th & 8th**

\_\_\_\_\_ **Football (Aug. 24)**  
 \_\_\_\_\_ **Basketball (Nov. 9)**  
 \_\_\_\_\_ **Baseball (Feb. 8)**

**One form per team**  
**(PLEASE PRINT)**

SCHOOL \_\_\_\_\_ ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE# \_\_\_\_\_

Names, Birth dates and Grades on this Roster have been verified as correct. (All listed students are enrolled in above named school).

Principal Signature \_\_\_\_\_ Date \_\_\_\_\_ Athletic Director Signature \_\_\_\_\_ Date \_\_\_\_\_

LAST NAME	FIRST NAME	GRADE	PLAYER NUMBER
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**DUE TO C.Y.A.A. ATHLETIC DIRECTOR BY THE DATES LISTED ABOVE**

\_\_\_\_\_  
 Head Coach

\_\_\_\_\_  
 Assistant Coach

LAST NAME	FIRST NAME	GRADE	PLAYER NUMBER
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**C.Y.A.A.**  
**CATHOLIC YOUTH ATHLETIC ASSOCIATION**  
**GIRLS 2009-2010 SPORTS ROSTER**  
**5th & 6th**

\_\_\_\_\_ **Volleyball (Aug. 25)**  
 \_\_\_\_\_ **Softball (Nov. 10)**  
 \_\_\_\_\_ **Basketball (Feb. 9)**

**One form per team**  
**(PLEASE PRINT)**

SCHOOL \_\_\_\_\_ ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE# \_\_\_\_\_

Names, Birth dates and Grades on this Roster have been verified as correct. (All listed students are enrolled in above named school).

Principal Signature \_\_\_\_\_ Date \_\_\_\_\_ Athletic Director Signature \_\_\_\_\_ Date \_\_\_\_\_

LAST NAME	FIRST NAME	GRADE	PLAYER NUMBER
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**DUE TO C.Y.A.A. ATHLETIC DIRECTOR BY THE DATES LISTED ABOVE**

\_\_\_\_\_  
 Head Coach

\_\_\_\_\_  
 Assistant Coach

LAST NAME	FIRST NAME	GRADE	PLAYER NUMBER
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**C.Y.A.A.**  
**CATHOLIC YOUTH ATHLETIC ASSOCIATION**  
**GIRLS 2009-2010 SPORTS ROSTER**  
**7th & 8th**

\_\_\_\_\_ **Volleyball (Aug. 25)**  
 \_\_\_\_\_ **Softball (Nov. 10)**  
 \_\_\_\_\_ **Basketball (Feb. 9)**

**One form per team**  
**(PLEASE PRINT)**

SCHOOL \_\_\_\_\_ ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE# \_\_\_\_\_

Names, Birth dates and Grades on this Roster have been verified as correct. (All listed students are enrolled in above named school).

Principal Signature \_\_\_\_\_ Date \_\_\_\_\_ Athletic Director Signature \_\_\_\_\_ Date \_\_\_\_\_

LAST NAME	FIRST NAME	GRADE	PLAYER NUMBER
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**DUE TO C.Y.A.A. ATHLETIC DIRECTOR BY THE DATES LISTED ABOVE**

\_\_\_\_\_  
 Head Coach

\_\_\_\_\_  
 Assistant Coach

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**One form per team  
(PLEASE PRINT)**

**CATHOLIC YOUTH ATHLETIC ASSOCIATION  
BOYS 2009-2010 TOURNAMENT ROSTER  
7th & 8<sup>th</sup>**

\_\_\_\_ **Football (Oct. 5)**  
\_\_\_\_ **Basketball (Jan. 11)**  
\_\_\_\_ **Baseball (Mar. 29)**

SCHOOL \_\_\_\_\_ ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE# \_\_\_\_\_

Names, Birth dates and Grades on this Roster have been verified as correct. (All listed students are enrolled in above named school).

Principal Signature \_\_\_\_\_ Date \_\_\_\_\_ Athletic Director Signature \_\_\_\_\_ Date \_\_\_\_\_

LAST NAME	FIRST NAME	GRADE	REASON IF INELIGIBLE TO PLAY	PLAYER NUMBER
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**DUE TO CYAA ATHLETIC DIRECTOR BY THE DATES LISTED ABOVE**

\_\_\_\_\_  
Head Coach

\_\_\_\_\_  
Assistant Coach

LAST NAME	FIRST NAME	GRADE	REASON IF INELIGIBLE TO PLAY	PLAYER NUMBER
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**One form per team  
(PLEASE PRINT)**

**CATHOLIC YOUTH ATHLETIC ASSOCIATION  
GIRLS 2009-2010 TOURNAMENT ROSTER  
7th & 8<sup>th</sup>**

\_\_\_\_ Volleyball (Oct. 5)  
\_\_\_\_ Softball (Jan. 11)  
\_\_\_\_ Basketball (Mar. 29)

SCHOOL \_\_\_\_\_ ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE# \_\_\_\_\_

Names, Birth dates and Grades on this Roster have been verified as correct. (All listed students are enrolled in above named school).

Principal Signature \_\_\_\_\_ Date \_\_\_\_\_ Athletic Director Signature \_\_\_\_\_ Date \_\_\_\_\_

LAST NAME	FIRST NAME	GRADE	REASON IF INELIGIBLE TO PLAY	PLAYER NUMBER
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**DUE TO CYAA ATHLETIC DIRECTOR BY THE DATES LISTED ABOVE**

\_\_\_\_\_  
Head Coach

\_\_\_\_\_  
Assistant Coach

LAST NAME	FIRST NAME	GRADE	REASON IF INELIGIBLE TO PLAY	PLAYER NUMBER
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**C.Y.A.A.**  
Catholic Youth Athletic Association

**Sanction Form**

School Requesting Review: \_\_\_\_\_

School's Phone Number: \_\_\_\_\_

Principal Signature: \_\_\_\_\_

Sport, Age & School in Question: \_\_\_\_\_

Reason for review: (attach additional information if needed)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Any action taken to this point

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of Coach requesting review: \_\_\_\_\_

Phone Number: \_\_\_\_\_

The C.Y.A.A. Board will review all requests and a response will be in written form within two weeks.

Thank you,

Gary Coffman  
Vincent Rasole  
C.Y.A.A. Athletic Directors

\_\_\_\_\_

Official Use Only:

\_\_\_\_\_ First offense      Action taken \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Second offense disqualified for tournament play