



# D3 ENTRY FORM

[www.LISFL.org](http://www.LISFL.org) (516) 433-1880

(PLEASE PRINT OR TYPE ALL INFORMATION)

FULL NAME OF TEAM: \_\_\_\_\_

LEAGUE AFFILIATION: LONG ISLAND SOCCER (FOOTBALL) LEAGUE DIVISION: D3 MEN

CLUB CONTACT: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

PHONE NUMBER: (\_\_\_\_\_) \_\_\_\_\_ *(please include area code)*

E-mail: \_\_\_\_\_

TEAM COACH: \_\_\_\_\_

PHONE NUMBER: (\_\_\_\_\_) \_\_\_\_\_ *(please include area code)*

E-mail: \_\_\_\_\_

***IMPORTANT:*** Your team will NOT be officially entered in the League Until  
Entry form, and entry fee of \$100 received by the LISFL

**Field Name and Directions:**

Make checks payable to L.I.S.F.L. Mail this application together with your check to:

**LISFL 95 Broadway Hicksville, NY 11801**

*For Information Call (516) 433-1880*