



UYFL Participant Travel Form

Team Name:

Team Level:

Participant/Coach Name:

EMERGENCY CONTACT INFO

Family Phone Number:

Family Email:

HOUSING INFORMATION

Hotel Name:

Arrival Date:

**This form must be filled out by every individual on roster and be submitted at certification.*

**All fields must be filled in.*

**Same email and phone number cannot be used for all individuals.*

**Any questions and/or concerns regarding this form may be directed to*

Nationals@unitedyfl.com

847-489-0115