



**Human Services Department
Youth Sports Committee
AB2404 -- Data Collection Form**

League Name: _____

Number of male City residents participating in the league: _____

Number of female City residents participating in the league: _____

Number of youth (resident & non-resident) participating in the league: _____

I hereby certify that the information above is accurate and that
_____ (name of league) complies with all the rules and
regulations associated with the Youth Sports Committee and the use of the City
facilities as outlined in the facility use agreement.

Print Name

Date

League Title

Signature