



TEAM NAME: _____

Team name will be engraved on each name plate if provided. Engravings can include numbers and punctuations. Trophy styles shown may be subject to change due to availability.

TEAM TROPHY FORM

PLAYER NAME
TEAM NAME
SUMMER 2020

List all players on the team below and mark their trophy choice.

 PLAYER NAME TEAM NAME SUMMER 2020

Medal	Small	Trophy	TOTAL
\$6	\$9	\$12	
GRAND TOTAL \$			

Player's Full Name Required	Name to be Engraved (If left blank, Full Name will be used)



PHOTO NIGHT SEE REVERSE

If submitted after **Friday, July 3**, include **\$10 Late Fee**

CONTACT / PAYMENT INFORMATION

This form is best used to submit with Cash or Check payments only.
CREDIT CARD ORDERS: Please visit our NEW convenient Trophy Online Ordering site: Allyearsports.net

Full Name _____

Mailing Address _____

City _____ State _____ Zip _____ Phone #1 _____

Email _____ Phone #2 _____

TXSA # _____

Flag Football

SUMMER 2020

All orders must be received WITH **PAYMENT** no later than 5:00pm on **Friday, July 3**
 Orders received late must include \$10 late fee.

- IMPORTANT**
- Use this order form for the entire team.
 - NO multiple payments accepted.
 - Make checks out to All Year Sports.
 - Returned checks subject to \$25 fee.
 - Orders NOT accepted without authorizing signature.
 - Late fee added to total of entire order.
 - Late orders are subject to availability and style.

- ADD PLAYERS**
- **OPTION 1** Submit new player by ordering online.
 - **OPTION 2** Visit nysonline.net, FIND YOUR LEAGUE.
 - Print out a blank trophy form.
 - Write and circle "ADD-ON" next to the new player.

- ORDER SUBMISSION**
- **CREDIT CARD:**
ONLINE AllYearSports.net
 - **CASH, CHECK or MONEY ORDER:**
 - **MAIL** AYS Trophy
 8550 N 91st Avenue #49
 Peoria, AZ 85345
 - **DROP OFF** at your local NYS office.
 - **NO CALL-IN ORDERS.**
 - **Taking a photo of your trophy form via cell phone is not an accepted format for submission.**

PHOTO / TROPHY PICKUP
 Choose ONE team representative to pick up photos and trophies for the whole team.
Wed & Fri, Aug 5 & 7
 10:00 AM to 5:00 PM
 NYS Office
 10935 Wurzbach Rd. Ste.# 302 | San Antonio

OFFICE USE

Cash \$ _____ Check# _____

CC Auth# _____ Date Ran _____

Received by _____ Date _____

Entered by _____ Date _____

Accounting _____ Date _____