Nominate a Player for the Germantown Legends' 'PLAYER OF THE MONTH'

Do you know a youth soccer player who should be recognized for his or her achievements, both on and off the field? If so, send in a nomination to have that young person honored as a Germantown Legends Player of the Month to INFO@GermantownLegends.com or fax to (901) 328-5797.

Each month, we'll be recognizing one male and one female player who sticks out among the rest. The players selected will be featured on a Player of the Month page on our website and mentioned in our monthly newsletters.

Nominations can be made for players in any of the Germantown Legends Soccer Programs (including HappyFeet, Future Legends (U5- U10 REC), Advanced Rec/ Academy, Jr. Legends (U11- U19 REC), Legends and TOPSoccer) whose recent actions represent a balance of athletic achievement, sportsmanship and citizenship. Examples of the desired criteria include:

- Impactful or notable in-game performance
- Displays good sportsmanship and the promotion of teamwork
- Community service
- Superior academic achievement
- Overcoming personal obstacles

It's important to note that accomplishments off the field are valued just as much as those achieved on the field. If you think you know a player who fits this description, be sure to fill out the form to nominate him or her for the Germantown Legends Player of the Month.

The deadline to have your nominee considered for next month's honoree is the **25**th, and new Players of the Month will be announced the first week of each month.

Thank you for helping recognize the players that make the Germantown Legends Soccer program special.















PLAYER OF THE MONTH NOMINATION FORM MONTH_____YEAR____ NOMINEE: _____ TEAM: BOYS GIRLS PROGRAM: () HappyFeet () Future Legends (U5- U10 REC) () Jr. Legends (U11- U19) () TOPSoccer () Advanced Rec/ Academy () Legends () Other ____ CONTACT INFORMATION: PHONE: EMAIL: Provide an explanation of why this player deserves to be recognized. Use additional space, if needed. **ADDITIONAL CLUB INVOLVEMENT:**

ADDITIONAL CLUB INVOLVEMENT: () TOPSoccer 'Buddy' () HappyFeet Coach () Referee – Grade _____ () Coaching – License _____ () Other ______ NOMINATION FORM SUBMITTED BY: NAME: _____ PHONE: (______ EMAIL ADDRESS: _____ RELATIONSHIP TO PLAYER: () Self () Parent () Guardian () Coach () Other _____ Please return form to INFO@GermantownLegends.com or fax to (901) 328-5797.

NAME:				
SCHOOL:		Grade in current school year:		
1.	At what age did you start to play soccer?	Program name:		
2.	Positions played (Primary/ Secondary):			
3.	Favorite Soccer Skill or 'go to' Move:			
	On-field Strengths and Skills:			
 5.	Coaching or Referee license:			
6.	Involvement (Church, Community or School organizations): _			
—- 7.	Positions of leadership (Church, Community or School):			
8.	Honors or AP Classes:			
	Desired College Major:			
	ACT Score: SAT Score:			
11.	What is your favorite subject (or class) at school?			
12.	Favorite color:			
13.	Favorite soccer player:			
14.	Favorite soccer team:			
15.	Person you look up to most:			
	Favorite food?			
17.	Favorite healthy food:			
18.	Role model:			
19.	Favorite Movie:			
20.	What is your favorite TV show or thing to watch of TV?			
21.	What kind of music do you like?			
22.	What are you really good at?			
23.	What do you want to do when you grow up?			
24.	Tell us something that is funny about yourself.			
25.	What is your favorite thing to wear?			

26.	Favorite exercise:
27.	Least favorite exercise:
	Music you train to:
	Future Aspirations:
30.	Miscellaneous/ Anything else we should mention:

	PARENT(S) CONTACT INFO	COACH'S CONTACT INFO
NAME		
PHONE		
EMAIL		
NAME		
PHONE		
EMAIL		