**PLAYER RELEASE AND TRANSFER**

(ATTACH US YOUTH SOCCER PLAYER PASS TO THIS FORM IF AVAILABLE)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PLAYER NAME DATE OF BIRTH NMYSA ID NUMBER

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

STREET ADDRESS CITY ZIP PHONE

**Reason for Release/Transfer**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**RELEASE FROM**: Team Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Team #\_\_\_\_\_\_\_\_\_Age U-\_\_\_

PARENT NAME SIGNATURE DATE

RELEASING COACH NAME SIGNATURE DATE

LEAGUE/CLUB PRESIDENT SIGNATURE DATE

**TRANSFER TO**: Team Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Team# \_\_\_\_\_\_\_\_\_Age U-\_\_\_

PARENT NAME SIGNATURE DATE

ACCEPTING COACH NAME SIGNATURE DATE

LEAGUE/CLUB PRESIDENT SIGNATURE DATE

EFFECTIVE DATE: Date of Release/Transfer Approval: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Registrar Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Processed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_