

UNITED STATES YOUTH SOCCER OF NEVADA PLAYER ACTION FORM

FORM WILL NOT BE PROCESSED WITHOUT REQUIRED SIGNATURES

PLAYER/TEAM STATUS FOR: (please print)

NAME: _____

DATE: _____

ADDRESS: _____

DATE OF BIRTH: _____

CITY: _____ ZIP: _____

CURRENT TEAM NAME: _____

PHONE: _____

AGE GROUP: _____

EMAIL: _____

GUARDIAN: _____

SIGNATURE

SECTION I RELEASE

Player is being removed from roster-player pass **MUST** accompany form

REASON FOR RELEASE: _____

COACH: _____ DATE: _____

SIGNATURE

STATE REGISTRAR: _____ DATE: _____

SIGNATURE

SECTION II TRANSFER Player is being transferred from one team to another; player pass **MUST** accompany form

NEW TEAM: _____ TEAM #: _____ AGE GROUP: _____

OLD COACH: _____ DATE: _____

SIGNATURE

NEW COACH: _____ DATE: _____

SIGNATURE

STATE REGISTRAR: _____ DATE: _____

SIGNATURE

**MORE THAN FIVE (5) TRANSFERS WILL MAKE A TEAM INELIGIBLE FOR THE STATE CUP.
\$50.00 FEE TO ACCOMPANY TRANSFER FORM - PAYABLE TO: NYSA (NO CASH ACCEPTED)**

SECTION III GUEST PLAYER Permission to play on another team as a guest for a specific event

EVENT: _____ DATE: _____

GUEST TEAM NAME: _____ AGE GROUP: _____ DATE: _____

LENDING COACH: _____ DATE: _____

SIGNATURE

STATE REGISTRAR: _____ DATE: _____

SIGNATURE

SECTION IV SENIOR GAMES Youth retains youth status while participating in senior games; must have form signed before participation in first game. If senior and youth games conflict, youth games take precedence

YOUTH TEAM NAME: _____

YOUTH COACH: _____

USYSNV PRESIDENT: _____

SIGNATURE

NSSA PRESIDENT: _____

SIGNATURE