



# United States Amateur Soccer Association, Inc.

A National Member of the United States Soccer Federation

7800 River Road \* North Bergen, New Jersey 07047

(201) 861-6277



## YOUTH PERMISSION TO PLAY IN AMATEUR GAMES

West Virginia Soccer Association

(See Policy and Procedure for Youth Participation)

All forms must be original.

2-8-02

### A. Player Information:

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

Players Signature: \_\_\_\_\_ Phone: \_\_\_\_\_

Parents Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**I have enclosed the following material – all original: one Amateur Policy and Procedure for Youth Participation; three Youth Permission to Play in Amateur Games Forms; two Amateur Player Registration Forms; two Amateur Registration for Youth Forms. In addition, I have included one player pass the front of which has been filled out with a good picture attached.**

### B. TEAM INFORMATION:

Youth Team: \_\_\_\_\_ Age Division: \_\_\_\_\_ League: \_\_\_\_\_

Coach: \_\_\_\_\_ Phone: \_\_\_\_\_

Amateur Team: \_\_\_\_\_ Division: \_\_\_\_\_ League: \_\_\_\_\_

Manager: \_\_\_\_\_ Phone: \_\_\_\_\_

### C. PERMISSION: (Youth player retains youth status while participating in senior games.)

VP Youth: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

VP Amateurs: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_