

Interstate Permission Form

Rule 201 of the US Youth Soccer Policy on Players and Playing Rules requires that a youth player register each seasonal year in the State Association in which he/she resides with his/her parent(s)/guardian(s) or with the State Association in which the player is attending a boarding school or college or university the player is attending. A youth player wishing to participate with a team of a State Association other than the State Association in where the player is registered must first register with the State Association in which the player resides or is attending school and then receive written permission from both State Associations prior to participation.

This Interstate Permission Form may be used by (1) a player requesting permission to play as a member of a team of a State Association (the "Accepting State Association") other than the State Association (the "Releasing State Association") in which the player is registered, (2) a player requesting permission to play on a team in another State Association as a guest player, or (3) a player is relocating: moving from one State Association to another State Association during the seasonal year. It is the responsibility of the player and parent or guardian to provide the form to the appropriate parties within both the releasing and accepting State Associations.

NOTE THAT SOME STATE ASSOCIATIONS HAVE ENTERED INTO AGREEMENTS PROVIDING AUTOMATIC PERMISSION TO PLAY ON A TEAM IN ANOTHER STATE ASSOCIATION. SOME STATE ASSOCIATIONS PROHIBIT THE USE OF GUEST PLAYERS, SO ALWAYS CHECK WITH THE STATE ASSOCIATION WITH WHICH THE PLAYER IS REGISTERED TO DETERMINE WHETHER THE USE OF THIS FORM IS NEEDED.

- Instructions:
1. Player must register and pay any appropriate fee(s) of the State Association in which the player resides.
 2. Complete the Player Information section of this Interstate Form or a form provided by the State Association
 3. Send the completed Interstate Form to the appropriate party within the State Association in which the player is registered.
 4. Releasing State Association must complete the Releasing section of this Form.
 5. Accepting State Association must complete the Accepted section of this Form.

PLAYER INFORMATION

Name:	Player ID Number:	DOB:	M/F:
Address:	City and State:	Zip:	
Parent / Guardian Name:	Phone Number:		
Current Team Name:	Date Last Played:	Age Group:	
Coach of Current Team Signature:	Print Name of Coach:	Date:	
Parent / Guardian Signature:	Date:	Email:	

TYPE OF CHANGE: Please indicate the type of permission you are seeking and State Associations involved: **I. Interstate Permission, II. Guest Player Permission, or III. Relocation Release.**

I. ___ Interstate Permission: Player is registered with one State Association but wishes to play as a member of a team of another State Association

Releasing State Association: ___ **Accepting State Association:** ___

ODP Declaration: State Association (Releasing or Accepting) _____

II. ___ Guest Player Permission: Player is seeking to guest play with team from another State Association.

Tournament Name:	Hosting State:	Dates of Tournament:
Guest Team:	Guest State:	Team Coach:

III. ___ Relocation Release: Player has moved from one State Association to another State Association during the seasonal year.

Releasing State Association: ___ **Accepting State Association:** ___

STATE ASSOCIATION REGISTRAR / STATE ASSOCIATION OFFICE USE ONLY (Check appropriate boxes)

The player's current season member pass will be generated by the Releasing State Association or by the Accepting State Association. **(Check One.)**

Player wishing to play with a team of another State Association other than the State Association in which the player is registered will be insured by the Releasing State Association or by the Accepting State Association. **(Check One.)**

Releasing State Association:				Accepting State Association:			
<input type="checkbox"/>	Player is registered and in good standing.			<input type="checkbox"/>	Player is registered and in good standing.		
<input type="checkbox"/>	Interstate Permission	<input type="checkbox"/>	Guest Player	<input type="checkbox"/>	Interstate Permission	<input type="checkbox"/>	Guest Player
<input type="checkbox"/>	USYS Cup Team	<input type="checkbox"/>	Non-Cup Team	<input type="checkbox"/>	USYS Cup Team	<input type="checkbox"/>	Non-Cup Team
<input type="checkbox"/>	Participated in USYS	<input type="checkbox"/>	Relocation Release	<input type="checkbox"/>	Participated in USYS	<input type="checkbox"/>	Relocation Release
<input type="checkbox"/>	Permission Granted	<input type="checkbox"/>	Permission Denied	<input type="checkbox"/>	Permission Granted	<input type="checkbox"/>	Permission Denied
Comments:				Comments:			
Signature:				Signature:			

Printed Name:	Printed Name:
Title:	Title:
Date:	Date:

Additional person completed form should be faxed to: _____ Fax #: _____ Email: _____

