## UNITED STATES YOUTH SOCCER OF NEVADA PLAYER ACTION FORM

## FORM WILL NOT BE PROCESSED WITHOUT REQUIRED SIGNATURES

PLAYER/TE	AMSTATUS FOR: (please print)			
NAME:		DATE:		
ADDRESS:		DATE OFBIRTH:	DATE OFBIRTH:	
CITY:	ZIP: CURRENT TEAM NAME:			
PHONE:		AGE GROUP:	AGE GROUP:	
EMAIL:		GUARDIAN:	GUARDIAN:	
SECTION 1 H	RELEASE Player is being remo	oved from roster-player pass MUST ac	ccompany form	
	REASON FOR RELEASE:			
	COACH:	DATE:		
	STATE REGISTRAR:	DATE:		
SECTION II	TRANSFER Player is being transferred from	n one team to another; player pass MU	JST accompany form	
	NEW TEAM:	TEAM #:	AGE GROUP:	
	OLD COACH:	DATE:		
	NEW COACH:			
	STATE REGISTRAR:			
		FERS WILL MAKE A TEAM INELI TRANSFER FORM – PAYABLE TO:		
SECTION III	GUEST PLAYER Permission to play or	n another team as a guest for a specific	event	
	EVENT:	DATE:		
	GUEST TEAM NAME:	AGE GROU	JP: DATE:	
	LENDING COACH:S	DATE:		
	STATE REGISTRAR:	SIGNATURE	DATE:	
SECTIONIV	<b>SENIOR GAMES</b> Youth retains yout	h status while participating in seni	or games; must have form signed be	efore
2201101111	•		s conflict, youth games take precede	
	YOUTH TEAM NAME:		DACH:	
	USYSNV PRESIDENT:	NSSA PRE	SIDENT:	