

# NCYSA Eligibility Clearance For Youth Player Playing In Senior Games

**INSTRUCTIONS:**

COMPLETE AND RETURN THIS FORM TO:

NCYSA  
 P O Box 29308  
 Greensboro NC 27429 (Fax: 336-856-0204)

1. YOUTH PLAYER NAME:		PASS #	Y																
STREET:		CITY:		NC	ZIP:														
D.O.B.		CURRENT TEAM NAME:																	

**2. YOUTH PLAYER**

I, \_\_\_\_\_ (YOUTH PLAYER), HAVE PERMISSION FROM \_\_\_\_\_ (YOUTH COACH OF CURRENT TEAM) TO PLAY AN UNLIMITED NUMBER OF SENIOR GAMES WITH \_\_\_\_\_ (SENIOR TEAM) WITHOUT LOSING MY YOUTH ELIGIBILITY.

SIGNATURE OF YOUTH PLAYER:	DATE:
SIGNATURE OF YOUTH COACH:	DATE:

**3. STATE SENIOR ASSOCIATION**

\_\_\_\_\_ (YOUTH COACH) HAS REQUESTED AND RECEIVED PERMISSION FROM THE STATE SENIOR ASSOCIATION TO PERMIT \_\_\_\_\_ (YOUTH PLAYER) TO PLAY IN THE SENIOR ASSOCIATION.

SIGNATURE OF AUTHORIZATION OFFICIAL OF THE STATE SENIOR ASSOCIATION:	
	DATE:

**4. STATE REGISTRAR**

\_\_\_\_\_ (YOUTH PLAYER) HAVING THE PROPER AUTHORIZATION FROM HIS/HER YOUTH COACH AND THE STATE SENIOR ASSOCIATION IS GRANTED ELIGIBILITY CLEARANCE TO PLAY IN SENIOR GAMES.

SIGNATURE OF STATE REGISTRAR:	DATE:
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**NOTE: "IN THE EVENT OF A CONFLICT BETWEEN A SENIOR TRIAL GAME AND A YOUTH GAME, THE YOUTH GAME SHALL TAKE PRECEDENCE." UNITED STATES SOCCER FEDERATION, RULE 4.2.4, 2104.**

MAIL OR FAX TO:  
 NORTH CAROLINA YOUTH SOCCER ASSOCIATION  
 P.O. BOX 29308  
 GREENSBORO, NC 27429  
 FAX 336-856-0204