



United States Adult Soccer Association, Inc.

Affiliated with the United States Soccer Federation
California Soccer Association - North • 1346 Silver Avenue
San Francisco, CA 94134-1226
415-467-1881

AMATEUR PLAYER TRANSFER FORM

'A' 'AD'

PLAYER INSTRUCTIONS: Please complete the information requested in the shaded areas, including the date and your signature in the bottom segment of the form. Please type or use ballpoint pen firmly. MALE FEMALE

Player's Name (Last Name First)

Player's Pass NO. (if known)

Address

Date of Birth Month/Day/Year

City

State

Zip Code

Email Address

Phone

U.S. Citizen

YES

NO

Intent to become a US Citizen?

YES

NO

Country of Birth

TEAM REPRESENTATIVE INSTRUCTIONS: Please all information in this segment, then sign and date the bottom segment of the form before sending to the State Registrar, enclosing the appropriate fees.

This amateur player registration form may be used as an "A" FORM (Amateur) or as an "AD" Form (Amateur Detention)

Please mark the appropriate box at the top of the page and below.

Attach Photo in this box

California Soccer Association North

Code State Association

League #

Current League

Team#

Current Team

Player's Previous Team

New Team Representative's Name

Address

City

State

Zip Code

Email Address

Phone

Soccer is a contact sport involving risk of serious injury, disability or death. Not all risks are foreseeable. In consideration of being allowed to participate, I agree to release, waive and covenant not to sue United States Soccer Federation or affiliates on account of injury, death or property damage alleged to be caused in whole or in part by affiliates' actions or omissions.

I HAVE READ THE RELEASE & DISCLAIMER AND RECOGNIZED THAT I GIVE UP SUBSTANTIAL RIGHTS BY SIGNING. I KNOWINGLY ASSUME THE RISK.

Player Signature _____ Date _____

Team Representative _____ Date _____

State Registrar _____ Date _____