



UNITED STATES ADULT SOCCER ASSOCIATION, INC.

National Cups Entry Form 2009 - 2010



THIS FORM MUST BE TYPED AND ALL SPACES COMPLETED.

Check One

ENTRY FEE

- US National Men's Amateur Cup \$ 250: Deadline 3/5/10 *Men Amateur Status players only*
- US National Women's Cup \$ 250: Deadline 3/5/10 *Open to Women Pro & Amateur players*
- US National Men's Over 30 Cup \$ 250: SEPTEMBER 11, 2009 (DEADLINE FOR ENTRY)
- US National Men's Under 23 Cup \$ 250: Deadline 3/5/10
- US National Women's Under 23 Cup \$ 250: Deadline 3/5/10
- US National Men's Open Cup \$ 350: SEPTEMBER 11, 2009 (DEADLINE FOR ENTRY), *Qualifies Teams for the US Open Cup*

Full Name of Team Entering: _____

State, Regional or National League Affiliation: _____

Primary Uniform:	Shirts _____	Shorts _____	Socks _____
Alternate Uniform:	Shirts _____	Shorts _____	Socks _____

Team Manager: _____ Home Phone: (____) _____

Address: _____ Cell Phone: (____) _____

City: _____ Work Phone: (____) _____

State/Zip: _____ **E-Mail:** _____

Team Coach: _____ Home Phone: (____) _____

Address: _____ Cell Phone: (____) _____

City: _____ Work Phone: (____) _____

State/Zip _____ **E-Mail:** _____

NOTE: Check with your State Association and Region for additional fees. All additional state association fees must be approved by the regional commissioner.

1. **NO TEAM** will be allowed to compete at **ANY LEVEL** until this form (and the fee) has been received by the **National State Association Cup Commissioner and the Regional Cup Commissioner.**
2. Only State Association, National League or Regional League checks will be accepted for cup entries, payable to USASA. Club and team checks will NOT be accepted. A team may enter more than one competition if it meets the criteria. One form required for each entry.
3. A \$500 bond is required from all state winners within one week of being declared the State Champion. Only State Association checks, Money Order, or Cashiers Checks will be accepted, made payable to the USASA. **A return address must accompany that check.**
4. All decisions of the National Cup Committee are final and binding.

I have read and understand the USASA National Cups Policies. I am entering the team named on this entry form with the full understanding that all games in these competitions will be governed by the USASA National Cup Policies, the Constitution and Rules of the USASA, the USSF, and The Laws of the Game as published by FIFA.

Printed Name of Applicant _____

Signature _____ Date _____

Return this Form and all fees to: Illinois State Soccer Association, 2001 S. HALSTED STREET, SUITE 100, CHICAGO, IL 60608

Date Entry Form Received: _____ Time: _____



United States Soccer Federation, Inc. International Clearance Request Form

MALE
FEMALE

A. BIOGRAPHICAL INFORMATION
(Type or print clearly)

Player's Last Name First Name Middle Initial

Mother's Maiden Name First Name Middle Initial

Father's Last Name First Name Middle Initial

Current United States Address City State Zip

Date of Birth Social Security Number

Month / Day / Year (optional) Place of Birth (City & State) Country

Citizenship Contact Number in the United States

B. REQUEST FOR INTERNATIONAL TRANSFER CERTIFICATE

Last Foreign Club Participated League State/Country

Date of Last Game Professional/Amateur Date Clearance Requested

Club Wishing to Participate With League State/Country

I hereby confirm all of the above information to be correct. I also confirm that I am presently not under a professional contract to any other team (domestic or foreign) and I am not under suspension by any member organization of Federation Internationale de Football Association.

Signature of Player Date

Signature of Parent or Guardian (if applicable) Date

Please complete and submit this form either by fax or mail to:

U.S. Soccer Federation, Inc.
Attn : Federation Services Department
1801 South Prairie Avenue
Chicago, IL 60616
312-808-1300
312-808-9263 fax