UNITED STATES SOCCER FEDERATION REGISTRATION FORM

- ☐ PROFESSIONAL
- ☐ AMATEUR
- ☐ AMATEUR DETENTION
- ☐ RELEASE
- ☐ LOAN
- ☐ LOAN CANCELLATION
- ☐ TRANSFER

YEAR

BIOGRAPHICAL INFORMATION

LAST NAME	FIRST NAME, M.I.	SOCIAL SECURITY NUMBER
		– –

MAILING ADDRESS	CITY	STATE	ZIP CODE (9 DIGIT)
			–

AREA CODE, HOME TELEPHONE NUMBER	SEX	DATE OF BIRTH	PLACE OF BIRTH
– –		MONTH / DAY / YEAR	☐ USA ☐ OTHER: (specify)

CITIZENSHIP (COUNTRY)	LAST TEAM PLAYED FOR			
☐ USA ☐ OTHER: (specify)	TEAM/SCHOOL	LEAGUE	STATE	COUNTRY

PROFESSIONAL REGISTRATION

LENGTH OF CONTRACT _____ START _____ END

LENGTH OF OPTION _____ START _____ END

_____ TEAM _____ LEAGUE

***PLAYER'S CONTRACT MUST BE ATTACHED TO REGISTRATION**

PROFESSIONAL PLAYER LOAN

_____ TEAM LOANED TO _____ LEAGUE

_____ START _____ END

CONDITIONS:

LOAN CANCELLATION

_____ DATE

AMATEUR REGISTRATION

_____ TEAM _____ LEAGUE

PROFESSIONAL PLAYER RELEASE

_____ TEAM _____ DATE

PROFESSIONAL PLAYER TRANSFER

_____ TEAM TRANSFERRED TO _____ DATE

☐ UNDER TERMS OF THE CURRENT CONTRACT
☐ PURSUANT TO THE TERMS OF THE ATTACHED CONTRACT

_____ TEAM REPRESENTATIVE SIGNATURE _____ DATE

_____ PRO LEAGUE COMMISSIONER/STATE REGISTRAR SIGNATURE _____ DATE

I hereby consent to be registered as a Professional/Amateur Player and agree to observe the rules, regulations and By-Laws of the United States Soccer Federation, Inc. I further acknowledge that I am presently not under professional contract to any other team (domestic or foreign) and I am not under suspension by any member organization of the United States Soccer Federation, Inc.

_____ PLAYER'S SIGNATURE _____ DATE

A REGISTRATION IS NOT VALID UNLESS ACKNOWLEDGED BY THE SECRETARY GENERAL/REGISTRAR

Return to: United States Soccer Federation, Inc. 1801 S. Prairie Ave., Chicago, IL 60616 ATTN.: Registrar
Phone (312) 808-1300 Fax (312) 808-9263