

2008-09 NCYSA PLAYER/COACH STATUS FORM

1. CLASSIC CHALLENGE U10 ACADEMY RECREATION

NOTE - THIS FORM SHOULD BE USED TO ADD A PLAYER/COACH AFTER THE INITIAL WORK ROSTER IS SUBMITTED, ROSTER A PLAYER TO MORE THAN ONE TEAM, RE-ROSTER A PLAYER, RELEASE A COACH OR RECREATION PLAYER.

DO NOT USE THIS FORM TO MAKE CORRECTIONS TO A ROSTER. USE THE MOST CURRENT ROSTER.

PLAYER/COACH INFORMATION

2. TEAM NAME: U-__ __ (FOR CHALLENGE), OR 8-1-__ __ (FOR CLASSIC)											
3. ASSOCIATION NAME:											
4. USYSA PASS #	Y		-		-						
5. FIRST NAME:					MI	LAST NAME:					
6. ADDRESS:						CITY:			STATE:	ZIP:	
7. AREA:	PHONE:		8. <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE		BIRTH DATE						
							m	m	d	d	y y

9. PLAYER INFORMATION

<input type="checkbox"/> PLAYER PLAYER JERSEY #		
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10. COACH INFORMATION

IMPORTANT: Confirm with Risk Management Liaison approval has been received.

May NOT submit without a current Risk Management

confirmation

<input type="checkbox"/> COACH <input type="checkbox"/> ASSISTANT COACH <input type="checkbox"/> MANAGER	RISK MGT. APPROVED: _____
CIRCLE ONE	Y E D C B A
COACH/ASSIST. NSCAA LICENSE: (CIRCLE ONE) P (PREMIER) AN (ADV. NATIONAL) N (NATIONAL)	

11. TRANSACTION

<input type="checkbox"/> ADDITION (first time added to a team this seasonal year)	<input type="checkbox"/> FROM RECREATION (attach recreation card)
<input type="checkbox"/> RELEASE COACH (please attach the coach's card)	<input type="checkbox"/> RECREATION Player (attach recreation card)
<input type="checkbox"/> RE-ROSTERING - (adding a player who has been released from another team during the current seasonal year)	
<input type="checkbox"/> PLAYER MULTIPLE ROSTERING	
CUP TEAM	<input type="checkbox"/> CLASSIC <input type="checkbox"/> CHALLENGE <input type="checkbox"/> RECREATION ASSOCIATION:
NON-CUP TEAM	<input type="checkbox"/> CLASSIC <input type="checkbox"/> CHALLENGE <input type="checkbox"/> RECREATION ASSOCIATION:

12. REGISTRAR VALIDATION

REGISTRAR MUST STAMP, SIGN AND DATE HERE. (Please Use the Appropriate NCYSA Stamp.)
