

U.S. Soccer Federation Proof of Entry Prior to 12 Years of Age Submission Form (P12 5-11)

A. BIOGRAPHICAL INFORMATION (Type or print clearly)

Player's Last Name	First Name	Middle Initial			
Mother's Maiden Name	First Name	Middle Initial Middle Initial			
Father's Last Name	First Name				
Most Recent United States Address	City	State	Zip Code		
E-mail Address	Primary Phone Number				
Birth DateMonth Day Year	_ Gender N	Male / Female			
Country of Birth	Country of Citizenship				
B. SUBMISSION INFORMATION (This section MUST be completed or the application)	on will <u>NOT</u> be processe	d)			
Type of Documentation Provided					
Club Wishing to Participate With	League/State Association				



U.S. Soccer Federation First Registration Form (FR-11)

Player's Last Name	First Name				Middle Initial
Current U.S. Address	City		<u></u>	state	Zip Code
Country of Birth	Gender	Male / F	emale		
Birth Date Month Day Year	E-mail Addr	ess			
Month Day Teal					
l,	, att	est the follow	ving to be	accurat	te:
Are you a <u>CITIZEN</u> of the United States?	Yes	No			
Have you ever been registered with <u>ANY</u> tea	ım outside of the	United State	es? Y	'es	No
Team to participate with			-		
League					
State Association					
By executing this form, I hereby represent that the in	formation contain	ned herein is	true and	correct.	
By: Signature of Player					
Signature of Player		Date:	Month	Day	Year
By: Signature of Parent or Guardian		Date:	Month	Day	Year
(Required for any player under the age of 18)		2410.		24,	. 541



U.S. Soccer Federation International Clearance Request Form (ITC 5-11)

A. BIOGRAPHICAL INFORMATION (Type or print clearly)

Discoving Loop Norway	First Name	NA: -l-II- I:tiI
Player's Last Name	First Name	Middle Initial
Mother's Maiden Name	First Name	Middle Initial
Father's Last Name	First Name	Middle Initial
Most Recent United States Address	City State	Zip Code
E-mail Address	Primary Phone Number	
Birth Date Month Day Year	Gender Male / Female	
Country of Birth	Country of Citizenship	
B. REQUEST FOR INTERNATIONAL TRANSFE (This section MUST be completed or the applicat Last Foreign Club Participated		League
·	State, Country	Loaguo
Date of Last GameMonth Day Year	Professional/Amateur	
Club Wishing to Participate With	State/Country	League
I hereby confirm all of the above information of professional contract to any other team (dome organization of Federation Internationale de F	estic or foreign) and I am not under suspensi	
Signature of Player	Date: Month Day Year	
Signature of Parent or Guardian (Required for any player under the age of 18)	Date: Month Day Year	