



**New York State West Youth Soccer Association
Player Release/Transfer Form**

Name _____ Date of Birth _____ Gender ____

Address _____ Registration Number _____

City _____ State _____ Zip _____

Current Club _____ Current Team _____

This form should be used when a player is released from a team in a club and wishes to transfer to a team in a different club. This should **NOT** be used for intra-club release and transfers.

RELEASE – Player is removed or transferred from the roster. Original Pass must be surrendered if transferring to another club.

Team _____ Club _____ Age Group ____

Reason: _____

Signature of Coach or Club Official of Releasing Team _____

Date _____

For Office Use Only

TRANSFER – Player is being transferred to another Club/team. Release must be complete at the time of transfer.

New Club _____ New Team _____ Age Group ____

Signature of Coach or Club Official of Receiving Team _____

Date _____

For Office Use Only