UNITED STATES SOCCER FEDERATION, INC.
INTERNATIONAL CLEARANCE WAIVER FORM

Please Print Clearly

Date of Birth

_____/_____/_____
Last Name First Name Middle Initial Day Month Year

_____
Current Address City State Zip Code

I, _____, do hereby state as follows:

(1) I am under the age of 17; and

[please check one for #2 and #3]

(2) _____ I have not signed a contract with any professional team*, or

_____ I have signed a contract with a professional team**.

(3) _____ I have not received any money or other remuneration for playing soccer with a professional team*, or

_____ I have received money or other remuneration for playing soccer with a professional team**.

* If a player indicates that he/she has not played with or received monies or other remuneration from a professional team, player may register directly with a state association, which will allow him/her to play with one of the state's association's affiliated members.

** If player indicates that he/she has played with or received monies or other remuneration from a professional team, player understands that he/she must file an application for international clearance directly with the United States Soccer Federation, Inc.

(4) By executing this form, I hereby represent that the information contained herein is true and correct.

(5) Because I am under the age of 17, I understand this waiver form must also be signed by at least one parent or legal guardian/sponsor parent in the space provided below.

By: _____ _____
Signature of Player **Date**

By: _____ _____
Signature of Parent or Guardian **Date**

By: _____ _____
Signature of State Association Official **Date**

PLEASE ENCLOSE $10 APPLICATION FEE PAYABLE TO USSF

***** Please attach waiver to completed Application for International Clearance form***

Tim Mellander
511 June Street
Phone: 607-754-7600

NYSWYSA State Registrar
Endicott, NY 13760
email: registrar@nyswysa.org

[ ] *Federation Copy* [ ] *Player Copy* [ ] *Club Copy* [ ] *State Association/Sectional Director*