



Kentucky Youth Soccer Association

443 S. Ashland Ave., Ste. 201, Lexington, Kentucky 40502

Voice: 859 268-1254 - Fax: 859 269-0545

Email: Info@kysoccer.net

Website: <http://www.kysoccer.net>

Permission to Play Out of State Form Guidelines

For any players residing in Kentucky wishing to participate on a team in another state association, the following criteria must be met before permission will be granted:

1. Player (or parents) must fully complete the form below and submit to the state office for approval. All signatures will be required.
2. Along with the completed form, the following should also be submitted to the state office:
 - a. Copy of player's Birth Certificate or Passport.
 - b. Check made payable to KYSA in the following amount:
 - \$20.00 for each select player
 - \$10.00 for each recreational player
 - c. Self addressed stamped envelope for return of forms.
3. Faxed Forms will not be processed until we receive the above information.

The form will not be processed until we have received all the necessary paperwork. If you have submitted a birth certificate in the past and your child is registered in our League One Registration program then a copy of the birth certificate is not required. Please submit all forms and information to:

Kentucky Youth Soccer Association
Attn: Out of State Permission
443 S. Ashland Ave., Suite 201
Lexington, KY. 40502



US Youth Soccer Region II Out of State Permission to Play Form

This form, or your respective State Association online forms, must be completed by all players/coaches requesting permission to participate with a State Association other than the State in which they reside as well as by any players/coaches moving from one State Association to another during the Seasonal Year. If using this Form, it is the responsibility of those seeking approval to participate in another state to submit the appropriate approval to parties within both the releasing and accepting State Associations.

US Youth Soccer Rule 201 requires that a youth player register each seasonal year in the State Association in which he/she resides with his/her parent(s) /guardian(s). A youth player wishing to participate with a team from a State Association other than the state in which they reside must receive written permission from both State Associations prior to participation.

- Instructions:
- 1.) The player must register and pay any appropriate fee(s) in the state in which they reside.
 - 2.) Complete the Player Information and the Type of Request section of this form.
 - 3.) Send the completed Permission Form, with appropriate fees, to your State Association Office.
Out of State Fees: Select Players- \$20.00 Recreational Players-\$10.00
 - 4.) Your Home State Association must complete the Home section of this form.
 - 5.) Permission to play is valid for seasonal year applied for and must be obtained every seasonal year.

MEMBER INFORMATION:

Name:	<input type="checkbox"/>	ID Number (if known):	DOB:
	Male		
	<input type="checkbox"/>		
	Female		
Address:		City and State	Zip Code:
Parent/Guardian Name:		Phone Number:	Work Number:
Team Name:		League:	Age Group:
Player Signature (if player is under 18 years, parent/guardian signature required):		Date:	Email:

TYPE OF REQUEST: Please indicate the type of permission you are seeking and the name of the State Association:

- Out of State Permission* – Resides in one state but player wishes to play in the State Association listed below:

State Association:	Seasonal Year:
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- Relocation Release or Transfer* – Player has moved from one state to another during the seasonal year:

STATE REGISTRAR /STATE OFFICE USE ONLY (Check appropriate boxes)

Home State:			Accepting State:		
Player has participated in National Championship Play			Player is registered and in good standing.		
Player is registered and in good standing.			Relocation Release		
Relocation Release			Permission Granted		Permission Denied
Permission Granted		Permission Denied		Player ineligible for National Championship Play	
Player is a Transfer					
Other (Please Specify):					
Signature:			Signature:		
Printed Name:			Printed Name:		
Title:	Date:		Title:	Date:	