



Missouri Youth Soccer Association Supplemental Team Roster



LG# _____ TM# _____
 DIV (B/G) _____
 AGE U- _____

If a player is deleting from one team and adding to another team a separate form must be used for each team. If you as coach/manager are adding a player(s) and/or deleting a player(s) for the same team you can use one form. If you are adding a player to the roster you will also need membership form and copy of state birth certificate.

Team Name: _____ **Manager:** _____ **Telephone:** _____
Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Additions to Roster / For Transfer Rule please check the Missouri Youth Soccer Registration Handbook

Name (print)	Signature	Street Address, City, State, Zip	ID Number	Birthday YY/MM/DD	A/T/C
1.					
2.					
3.					
4.					

I certify that to the best of my knowledge the contents of this form are true and correct, and that all players herein have shown proof of age as required by the United States Youth Soccer Association.

Manager's Signature: _____ **Date:** _____

A-Add	T-Transfer
C-Coach	D-Delete

Deletions from Roster

Name (print)	Signature	Street Address, City, State, Zip	ID Number	Birthday YY/MM/DD	D/T/C
1.					
Request initiated by:		Reason:			
2.					
Request initiated by:		Reason:			
3.					
Request initiated by:		Reason:			

I _____ manager of the _____ soccer team/club do hereby release this/these player(s) to play for the team of their choice.

Manager's Signature: _____ **Date:** _____

League Registrar's Signature: _____	MYSA Registrar's Signature: _____
Date: _____	Date: _____

