



U.S. Soccer Federation International Clearance Request Form (ITC 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 _____
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 TRANSFER CERTIFICATE

(This section **MUST** be completed or the application will **NOT** be processed)

Last Foreign Club Participated _____	State/Country _____	League _____
Date of Last Game _____ Month Day Year	Professional/Amateur _____	
Club Wishing to Participate With _____	State/Country _____	League _____

I hereby confirm all of the above information to be correct. I also confirm that I am presently not under a professional contract to any other team (domestic or foreign) and I am not under suspension by any member organization of Federation Internationale de Football Association.

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 _____

Please complete and submit this form to FYSA by uploading in player's Got Soccer account

Florida Youth Soccer Association
2828 Lake myrtle Park Road
Auburndale, FL 33823312-808-1300

(863) 268-8220 phone
(863) 268-8221 fax
info@fysa.com



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

Player's Last Name	First Name	Middle Initial
Current U.S. Address	City	State
Country of Birth	Gender Male / Female	
Birth Date	E-mail Address	
Month Day Year		

I, _____, attest the following to be accurate:

Are you a **CITIZEN** of the United States? Yes _____ No _____

Have you ever been registered with **ANY** team outside of the United States? Yes _____ No _____

Team to participate with _____

League _____

State Association _____

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

By: _____
Signature of Player

Date: Month Day Year

By: _____
Signature of Parent or Guardian
(Required for any player under the age of 18)

Date: Month Day Year

**Please complete and submit this form to FYSA by uploading
in player's Got Soccer account**

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