



MEMBER

Event Information

We request approval to play in the _____ {Event}. To be held in _____, during the dates of _____

Event Director: _____ Telephone: _____

Address: _____ City: _____ State: _____

E-mail: _____

Player Information

Player Name: _____

Date of Birth: _____

Player Registration Number: _____

Primary Player Team Name: _____

Loaning Team Name: _____

Loaning Coach Signature: _____

Primary Team Information

Primary Team League: _____

By completing this for you (primary team) are allowing the above named player to travel, play, train and participate in activities with loaned team during the dates agreed upon.

Club Approval

(For Primary Club/Team Official Use Only)

Date / /20__

By: _____

Title: _____

In granting this permission to guest play, neither U.S. Soccer, USSSA, nor its Affiliates shall be liable for transportation, lodging, or injury to persons or property sustained during the approved event.