KENTUCKY YOUTH SOCCER

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MULTIPLE REGISTRATION PERMISSION FORM

In accordance with Section 4 of the Kentucky Youth Soccer State Rules. Players registering with a secondary select team must obtain written approval from both member organizations and Kentucky Youth Soccer Association. Complete this form and submit to lisaduvall@kysoccer.net for approval.

Section 4: Multiple Registration

• No player may be rostered/registered to play on more than one (1) select team. A player may register with a second select organization if written approval is given by both member organizations as well as approved by the Kentucky Youth Soccer office.

PRIMARY TEAM INFORMATION				
Club and Team Name:		Team Gender/Age Group:		
Head Coach Name:		Head Coach Email Address:		
SECONDARY TEAM INFROMATION				
Club and Team Name:		Team Gender/Age Group:		
Head Coach Name:		Head Coach Email Address:		
PLAYER INFORMATION				
Player Name:	Date of Birth:		Player ID Number:	
I understand that if any of the above information is inaccurate, incorrect, or false, that the Kentucky Youth Soccer Association may take disciplinary action towards the head coach and/team administrator and/the described team.				
President/Registrar's Signature (Primary Club)		Print Name		Date
President/Registrar's Signature (Secondary Club)		Print Name		Date
Kentucky Youth Soccer Approval:				
Date:				