

# MYSA Request for Interstate Player / Team Registration

Name of Player / Team : \_\_\_\_\_  
(Last Name) (First Name) (Middle Initial)

Players Birthdate: \_\_\_\_\_

Domicile Address: \_\_\_\_\_  
(Number) (Street) (City, State, Zip Code)

**I / We Hereby request release from the Mississippi Youth Soccer Association, and my local organization, \_\_\_\_\_, located in the city of \_\_\_\_\_, Mississippi, in the county of \_\_\_\_\_, and be allowed to compete in the \_\_\_\_\_ State Organization.**

## Olympic Development Program – chose one

I will try out for the ODP program in Mississippi \_\_\_\_.

I will try out for ODP in the State Organization for which I am requesting a transfer \_\_\_\_.

**Reason for this request:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

( Use additional pages if necessary )

A check made payable to **MYSA** for \$5.00 is attached

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of the Requesting Party

## Approvals

**Local Organization Name:** \_\_\_\_\_

Decision of the Local Organization :  Approved  Disapproved Date: \_\_\_\_\_

\_\_\_\_\_  
( Signature and Title of Officer )

## Mississippi Youth Soccer Association

Decision of the MYSA Council:  Approved  Disapproved Date: \_\_\_\_\_

\_\_\_\_\_  
( Signature and Title of Officer )

## State Soccer Association

Decision of the State Association:  Approved  Disapproved Date: \_\_\_\_\_

\_\_\_\_\_  
( Signature and Title of Officer )