

Senior Trial Games Request Form

Part A: (To be completed by Youth Coach or Authorized Team Official)

_____ of the U-19 Boys Girls
(Print Players Full Name and MYSA Registration Number)

_____ Team of the _____
(Youth Team Name) (League or Club Name)

has my permission to play an unlimited number of Senior games on the _____
(Senior Team Name)
during the _____ seasonal year while still remaining on my Youth team.
(Years ex. 95 - 96)

(Print Name) (Signature) (Date)

Part B: (To be completed by State Registrar)

The player indicated above is a properly registered youth player for the _____
(Years ex. 95 - 96)
seasonal year and has been granted eligibility and clearance for Senior play.

Signature, State Registrar Date

Part C: (To be completed by the Senior Association)

Permission is hereby granted for the Youth player indicated herein to play an unlimited number of games on the Senior Team indicated above during the seasonal year indicated above. This permission is with the understanding that the youth player will be subject to all Senior Association rules and procedures while participating as a Senior player.

Signature Title Date