



Illinois Youth Soccer Association

Guest Player Permit

This Guest Player Permit is for use by a team borrowing an IYSA/USYSA registered guest player who has been give permission by his/her registered team coach to participate as a guest player in a soccer activity (tournament, tryouts, indoor game, etc.) on another team. If the player is a child of the registered team coach, the permitting signature must be that of an authorized club representative. This Guest Player Permit is valid only for the soccer activity and dates indicated below. FOR TOURNAMENTS, THIS FORM MUST BE SUBMITTED WITH APPLICATION FOR TRAVEL OR \$5.00 WILL BE ASSESSED FOR EACH GUEST PLAYER FORM. NO FAXES.

1. Enter the required information as specified. Use separate form for each activity, date, location, coach, team.
2. On the league roster form, draw a line through the player(s) being replaced if applicable.
3. Guest Player(s) must use the player pass from their IYSA/USYSA registered league team.
4. Guest Player must be a currently registered USYSA player who has been been released by his/her registered coach to play as guest player with the below listed team.
This permission is granted by the signature* of the guest player's registered team coach or authorized club representative.
5. The information on the player pass must match the information on this Guest Player Permit.
6. For out-of-state tournaments, this Guest Player Permit must be validated by the Illinois Youth Soccer Association. *For Illinois sanctioned tournaments, this form does not need to be submitted to the IYSA for approval. However, this form must be completed and submitted with the team's league roster to the tournament.*
7. Registered Player's Team Coach/Club Representative and Borrowing Team Coach requesting to add guest players to his/her team roster must sign verification below.
8. *By their signatures, the undersigned attest compliance with the herein listed requirements and the accuracy of all information contained on this form.*

PLEASE PRINT Guest Player's Name(s)	Guest Player's Address	Guest Player's Parent/Guardian Signature	Player's Birthdate	Player's IYSA/USYSA Pass No.	Team Player Being Replaced
1					
2					
3					

Soccer Activity Date(s) _____ Name of Activity/Tournament _____
 Activity Location (City, State) _____
 Name of Borrowing Team _____ League Name _____ **G BOYS** **G GIRLS** U- _____
 Borrowing Team Coach _____ Phone (_____) _____ (H) (_____) _____ (O) _____
 Coach's Address _____ City, State, Zip _____

I, the Borrowing Team Coach agree to abide by the rules & regulations of the Illinois Youth Soccer Association.
 Signature of Borrowing Team Coach _____ Date _____ Coach's Pass# _____

Name of Registered Player's Team _____ League Name _____ **G BOYS** **G GIRLS** U- _____
 Registered Team Coach/Club Rep _____ Phone (_____) _____ (H) (_____) _____ (O) _____
 Coach's Address _____ City, State, Zip _____

I, the Guest Player's Registered Team Coach grant permission for my registered team player(s) to participate in the above listed soccer activity with the borrowing coach & team.
 Signature of Registered Team Coach/Club Rep _____ Date _____ Coach's Pass# _____

Mail Original with three(3) copies to IYSA, 1655 S. Arlington Heights Road, Suite 201, Arlington Heights, IL 60005 Revised 2/4/00