U.S. Soccer Federation
Proof of Entry Prior to 12 Years of Age
Submission Form

MALE ☐
FEMALE ☐

A. BIOGRAPHICAL INFORMATION (Type or print clearly)

Player's Last Name | First Name | Middle Initial

Mother's Maiden Name | First Name | Middle Initial

Father's Last Name | First Name | Middle Initial

Current United States Address | City | State | Zip

E-mail Address | ( ) - Home Phone Number | ( ) - Mobile Phone Number

/ / Date of Birth (mm/dd/yyyy)

Place of Birth (City & State) | Country | Citizenship

B. SUBMISSION INFORMATION (Must be completed)

Type of Documentation Provided

Club Wishing to Participate With | League/State Association

Please complete and submit this form either by fax, e-mail or mail to:

Virginia Youth Soccer Association
Attn: Player Registration
2239 D Tacketts Mill Dr
Woodbridge, VA 22192
703-494-0030
703-551-4114 fax
Lisa@vysa.com