



Virginia Youth Soccer Association International Clearance Waiver Form

Please Print or Type Clearly

Player's Last Name _____ First Name _____ Middle Initial _____

Current U.S. Address _____ City _____ State _____ Zip _____

Place of Birth _____
City _____ Country/State _____

Birth Date _____
Month / Day / Year

- Is the player 11 years of age or younger? Yes___ No___
- Is the player 17 years of age or older? Yes___ No___
- Has the player signed a contract with a professional team? Yes___ No___
- Has the player received any money or other remuneration for playing soccer? Yes___ No___

If the answer to all four of the above questions is "No", and the player is not coming to the United States to play in a tournament or friendly game and then return to his/her native country, the qualifications for a waiver are met.

If the player does not qualify for a waiver, an International Clearance Request form must be submitted.

By executing this form, I hereby represent that the information contained herein is true and correct.

By: _____ Date _____
Signature of Parent or Guardian

Printed Name of Parent or Guardian

By: _____ Date _____
Signature of League Assigned Registrar

**This completed form and four copies must be submitted to your registrar
when placing the player on a VYSA roster.**

Distribution of Original and Copies:

- State Office (original) League Registrar Assigned League Registrar Player Team