

WMYSATransfer Form

Transfer form needs to be submitted to WMYSA Registrar at gilurban@aol.com, scanned into GotSoccer player record, or mailed to 1463 Mulberry Lane, St. Joseph, MI 49085. Dual form is not required to be submitted to MSYSA

PLAYER TRANSFER - \$75 (make check payable to WMYSA)

CASH WILL NOT BE ACCEPTED. CHECKS MUST BE MADE PAYABLE TO WMYSA.

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Player's First Name:		
Player's Last Name:		
Player's Date of Birth:		
E-mail Address:		
Street Address:		
City:		
State:		
Zip:		
Home or Cell Phone (w/ area code):		
New Team Name:		
New Team Age Group and Gender:		
New League Name:		
Existing Team Name:		
Existing Team Age Group and Gender:		
Existing League Name:		
Reason for Transfer:		
	y have been granted a player release. All transfers must be in compliance with redures or bylaws. Player transfers will not be permitted by MSYSA during the bers must enforce this MSYSA requirement.	
• The new team must have room on their roster t	o accept the transfer player.	
	e than five transfer players on their roster and compete in MSYSA State Cup.	
 A copy of the form showing all required signature or be destroyed by the club to allow WMYSA to ac 	res needed for approval and the old team player pass card must accompany the dd the player to the roster of the new team.	e application
	nember organizaton and/or member organizations before approving the trans- be submitted to the WMYSA on the WMYSA Player Transfer form.	sfer.
Player (if 18) or Parent's Signature & Date:		
Existiung Team Club or Coach Signature & Date:		
New League Official Signature & Date:		
Existing League Official Signature & Date:		

THIS FORM IS INVALID UNLESS EXISTING TEAM/CLUB and BOTH LEAGUE OFFICIAL APPROVALS APPEARS ON IT.