



UTAH SOCCER ASSOCIATION

4476 South Century Drive, Suite B Salt Lake City, Utah 84123
Tel. 801-263-8166 Fax 801-263-8966 www.utahsoccer.org

PLAYER TRANSFER FORM

Name: _____ Pass ID# _____

Address: _____ Phone: (____)____-_____

City: _____, Utah Zip Code: _____

CURRENT TEAM: _____ Division: _____

I, _____, hereby request to be released from my current club, _____ . I understand that in order to be released, any outstanding obligations (such as equipment, uniforms, referee fees, etc.) must be returned/paid before a release can be obtained.

I, _____, being the official representative for the _____ Soccer Club do hereby release _____ from any and all obligations that might have been or were outstanding to the club as of this ____ day of _____, 20____.

Team Rep.: (print name) _____ Signature: _____

NEW TEAM: _____ Division: _____ I hereby accept the registration of _____ as of this ____ day of _____, 20____, and have verified with his/her previous club that all past obligations to his/her previous club have been fulfilled.

Team Rep.: (print name) _____ Signature: _____

I, _____, do hereby request to be transferred to the _____ Soccer Club as of this ____ day of _____, 20____.

I have enclosed the appropriate transfer fee of \$10.00 (cash or check).

AFFILIATED WITH THE UNITED STATES ADULT SOCCER ASSOCIATION,
UNITED STATES SOCCER FEDERATION AND
THE FEDERATION INTERNATIONALE de FOOTBALL ASSOCIATION

Soccer – your game for life

