



UNITED STATES SOCCER FEDERATION, INC
INTERNATIONAL CLEARANCE REQUEST FORM

A. BIOGRAPHICAL INFORMATION

(Type or Print Clearly)

MALE []
FEMALE []

Players' Last Name First Name Middle Name

Mother's Last Name (including maiden) First Name Middle Name

Father's Last Name First Name Middle Name

Permanent Address City State Zip

Present Address (if different than permanent) City State Zip

Month Day Year Date of Birth
Social Security Number (Optional)
Place of Birth (City & State)
Country

Citizenship Telephone Number Contact Number in the United States

B. REQUEST FOR INTERNATIONAL TRANSFER CERTIFICATE

Last Club Participated With League Country

Date of Last Game Professional/Amateur Date Clearance Requested

Club Wishing to Participate With League State

I hereby confirm all of the above information to be correct. I also confirm that I am not under professional contract to any other team (domestic or foreign) and I am not under suspension by any member organization of the Federation Internationale de Football Association.

Signature of Player Date

Signature of Parent or Guardian (if applicable) Date