



UNITED STATES SOCCER FEDERATION, INC.
INTERNATIONAL CLEARANCE REQUEST FORM

MALE []
FEMALE []

A. BIOGRAPHICAL INFORMATION
(Type or print clearly)

Player's 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 presently 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