



Missouri Youth Soccer Association



Effective July 1, 2009

Missouri Youth Soccer will no longer print player or coach passes for Missouri residents that request permission to play on a team in another state. The player must register in their home state association following the procedures listed below. After proper registration your out of state permission form with either be faxed or electronically sent to the registrar in the league you've chosen to play in.

This process must be followed for all Missouri Residents seeking to participate in any state other than Missouri.

The following procedures are for processing the Out of State permission:

- Register on line at [www.mysa.org/gotsoccer/out of state registration](http://www.mysa.org/gotsoccer/out%20of%20state%20registration)
 - Complete Player profile
 - Download generated Medical Release
 - Notarize
 - scan & attach to Player profile (if you do not have scanning capabilities you can fax to the State Office and they will scan them for you)
- Attach Birth Certificate to Player profile
- Submit payment as prompted upon completion of registration

The above steps will expedite your registration. We will no longer be returning any hard copy forms via the mail to anyone, unless you provide a self addressed stamped envelope.

If you choose to mail in your registrations as done in the past there will be a (10) working day turn around to process your paperwork, no exceptions.

If you have any questions, need additional information or are checking on the status of your registration, please first call the league you are playing in to see if they've received the fax or electronic email of the player you are looking for. If they have not then please call the Missouri Youth Soccer Association State Office at 636-936-3676.

The Game For All Kids



Missouri Youth Soccer Association

Missouri Resident Out of State Permission

Required for any Missouri resident wishing to play in another state



This form must be fully completed, signed and submitted to Missouri Youth Soccer Association each seasonal year with the Missouri Youth Soccer Emergency Medical Release & Liability Waiver, Proof of Age (birth certificate or other documentation by appropriate government agency) and payment.

Individual Out of State Fee - \$20.00

Send payment and forms to: Missouri Youth Soccer / 1270 Jungermann Road-Suite E / St. Peters, MO 63376

Season & Year: _____

Players Name: _____

Players Date of Birth: _____

Home Phone: (_____) _____

Street Address: _____

City: _____

State: _____

Zip Code: _____

Team Name: _____

League Name: _____

League's State Association: _____

Coach's Name: _____

Home Phone: (_____) _____

City: _____

State: _____

Zip Code: _____

Reason for Request to Play in Another State: _____

By my signature below,

- I certify that the information provided above is complete and accurate.
- I certify that I am not currently under and disciplinary actions or sanctions by Missouri Youth Soccer, its affiliates or any other State Association or US Soccer affiliate.
- I agree to abide by all the rules, regulations and policies of the Missouri Youth Soccer Association.
- I understand that this application is valid only for the seasonal year listed in the application and must be re-submitted every seasonal year.
- I understand that this permission is valid only for the player, team, league and state association listed.

Coach's Signature: _____ Date: _____

Player's Signature: _____ Date: _____

Parent's Signature: _____ Date: _____

THIS FORM IS NOT VALID UNLESS IT HAS THE MISSOURI YOUTH SOCCER STAMP AND AUTHORIZATION SIGNATURE WITH DATE.

Missouri Youth Soccer Authorization Signature & Stamp _____ Date: _____