

Instructions for Release Forms for New Players for Spring '12 season

Who DO NOT reside in the Coppell city limits or the CISD Boundaries

I. Irving Residents:

1. Fill out the NTSSA Release Form portion of the following page.
2. Fill out the Irving Soccer Association (ISA) Registration portion of the following page – *required!*
3. Check payable to ISA for \$20
4. 2 copies of state issued birth certificate or passport for new players OR 1 copy for returning players.

Submit all of the above to the CYSA office before January 5.

CYSA will then make sure the release is obtained from Irving Soccer Association.

II. Lewisville, Flower Mound, Highland Village Residents:

1. Fill out the NTSSA Release Form portion of the following page.
2. Get the release signed by an agent of GLASA by either:
 - a. Fax to GLASA at **972-221-4619** with a copy of the state issued birth certificate of the player, even if you've received a release from them previously. Request a signed copy be faxed back to you. OR
 - b. Go to GLASA office in person with completed form and birth certificate to get the required signature.
3. Once the release form has been signed by an agent of GLASA, it may be faxed to CYSA at 972-304-8791.

Submit signed form to CYSA by January 5.

III. Carrollton/Farmers Branch Residents:

1. Contact CFBSA at office@cfbsoccer.net or 972-245-9307 to find out the cost and procedure to obtain a release from their soccer association.
2. Once the NTSSA Release Form has been signed by an agent of CFBSA, it may be faxed to CYSA at 972-304-8791.

Submit signed form to CYSA by January 5.

Other Non-Coppell Residents:

Contact your local soccer association for instructions.

CYSA Contact Information:

Email: info@coppellyouthsoccer.com

Fax: 972-304-8791

Office: 972-304-0886



1740 S I-35, Suite 105
 Carrollton, TX 75006
 Fax 972-242-3600
 972-323-1323

RELEASE FORM

Affiliated with the United States Federation and Federation Internationals de Football Association
 Revised 11/2011 (CYSA)

Player's Legal Name:				Rec. X	Comp	Boys	Girls
Address:			Phone #:	() -	Date of Birth:		/ /
City	State: TX	ZIP Code:			Team Age Group:	U-	

Player Registration #:	Team Email	Parent Email
------------------------	------------	--------------

REASON FOR RELEASE

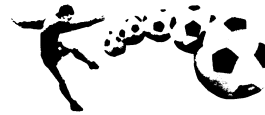
Player/Team requesting Release from Home Association: (North Texas Soccer does not sign for this Release, fax to your Releasing Association)

Name of Releasing Association:	Name of Receiving Home Association:	Coppell Youth Soccer Assoc.
A. No team available:	B. Player remaining on prior team in another Assn.:	
C. Other reasons (attach details on separate sheet if needed):		

SIGNATURES

X Player's Signature: _____ Date: _____
X Parent Signature: _____ Date: _____
 Home Assoc. Signature: _____ Date: _____

Players residing in Irving but outside of the CISD boundaries must complete this form!



Irving Soccer Association www.irvingsoccer.org

Last Name		First Name	Init.
Street		Apt #	City
Zip code	Phone	Male/Female	Birth Date
School			
Fathers Name		Work Phone	Cell Phone
Mothers Name		Work Phone	Cell Phone

IMPORTANT

We hereby certify that the above information is true and correct. We realize this soccer program is a nonprofit and voluntary program, instituted for the benefit of the youth in the community and we therefore agree to hold no party connected with the team, sponsors, or the league responsible for the injury or harm to the participant during the normal pursuit of team activities. Participation in league activities, playing or practicing, shall not be allowed until this contract has been signed. We, the undersigned do hereby agree to abide by the constitution and playing rules of the league.

Parent/Legal Guardian Name: _____ Signature: **X** Date: _____
 (please print)

Return this completed form to the CYSA office with a \$20 check payable to ISA by registration deadline.