



MINNESOTA YOUTH SOCCER ASSOCIATION INC.

10890 Nesbitt Avenue South
Bloomington, Minnesota 55437
Phone: 952-933-2384 (800-366-6972) | Fax: 952-933-2627
www.mnyouthsoccer.org



Application for Youth Participation in Adult Games

- The form must be returned to MYSA, at the address above with payment of the \$20.00 fee
You must be at least 16 years old by August 1st of the current soccer year.
You must be registered with an MYSA team.
You forfeit the MYSA medical insurance coverage by registering as a provisional adult, but you are covered by the USASA/MYSA insurance policy
An approved printed and laminated pass will be mailed to the address associated with the players MYSA registration

I, _____ (player) hereby request permission to play outdoor as an adult player for: _____ (team name) registered with the _____ (club or association). In the event of a conflict between an adult game and a youth game, the youth game shall take precedence.

I _____, UNDERSTAND THAT I WILL NOT BE COVERED BY THE MEDICAL INSURANCE PROVIDED UNDER THE POLICY OF MYSA WHILE PLAYING IN THE ADULT ASSOCIATION. I WILL, HOWEVER, BE COVERED UNDER THE MEDICAL INSURANCE PROVIDED BY THE USASA AND MINNESOTA SOCCER ASSOCIATION.

Player's SIGNATURE

Date of Birth

Street Address

City State Zip

Parent/Guardian SIGNATURE (required if player is a minor)

Parent/Guardian PRINT

Date:

Daytime Phone:

Adult Coach/Mgr. SIGNATURE

Adult Coach/Mgr. PRINT

CURRENT YOUTH COACH SHOULD COMPLETE BELOW

The above youth player has my approval to play as an adult player.** (See below)
Youth Coach/Mgr. SIGNATURE MYSA Team Code
Youth Coach/Mgr. PRINT Date

DATE: FEE PAID: Birthdate verified by: Forwarded to MSA:

** All current MYSA Rules and Policies shall govern the use of a youth participant in sanctioned adult games.