Missouri Youth Soccer Association

Roster Change Form

Team Name: _____ **Club Name:** _____ **Team Number:** _____

( ) Boys Team **( ) Girls Team** **Team Age Division:** _____ **Coach Name:** _____

Roster Change Codes:	A – Add	D – Drop	PT – Primary Transfer	ST – Secondary Transfer

For the Transfer Rule, please check the Missouri Youth Soccer Registration Policy. Players can not be dropped (deleted) by the coach/manager from the roster without parent or legal guardian signature except in limited circumstances as outlined in the Missouri Youth Soccer Registration Policy.

I request the following action to be taken for my team:

Change Code	ID Number	Player's Name	Parent/Legal Guardian Signature	Address	Birthday MM/DD/YYYY
1.					
2.					
3.					
4.					
5.					

I hereby certify that the above information is true and correct.

_____ _____

(Signature of Coach or Manager) **(Date)** **(League Registrar)** **(Date)**

_____

(Signature of Club Administrator if required) **(Date)**