

Permit Application

(Youth player to Adult team)

| PLAYER INFORMATION | |
|--------------------|-----------------------------|
| Name: | ID #: |
| Address: | |
| City: | Postal Code: |
| Home Telephone: | Mobile: |
| Email: | Date of Birth (mm/dd/yyyy): |
| Player Signature: | Date (mm/dd/yyyy): |

| PERMITTING FROM (Releasing Youth Team) | |
|--|--|
| Team: | |
| Age Group: | |
| Division: | |
| District: | |
| Releasing Team Official Name: | |
| Position: | |
| Phone: | |
| Email: | |
| Signature: | |
| Date(mm/dd/yyyy): | |

| PERMITTING TO (Accepting Adult Team) | |
|--------------------------------------|--|
| Team: | |
| Age Group: | |
| Division: | |
| League: | |
| Accepting Team Official Name: | |
| Position: | |
| Phone: | |
| Email: | |
| Signature: | |
| Date(mm/dd/yyyy): | |

| APPROVAL (Releasing Youth District) | |
|--|--|
| Releasing Youth District Registrar Name: | |
| Signature: | |
| Date(mm/dd/yyyy): | |

| APPROVAL (Accepting Adult League) | |
|---------------------------------------|--|
| Accepting Adult League Official Name: | |
| Position: | |
| Signature: | |
| Date(mm/dd/yyyy): | |

| MATCH INFORMATION | | | |
|-------------------|--|------------|--|
| Date: | | Home Team: | |
| Time: | | Away Team: | |

| SUBMISSION INSTRUCTIONS | | |
|----------------------------------|---|---|
| Submit to the attention of: | Ryan McQuillan, Member Services Coordinator | |
| Submit via one of the following: | 1) Mail | BC Soccer Association Office 250 – 3410 Lougheed Highway, Vancouver, BC, V5M 2A4 |
| | 2) Email: | ryanmcquillan@bcsoccer.net |
| | 3) Fax: | 604.299.9610 |

| PLEASE NOTE |
|--|
| <ul style="list-style-type: none"> A permit shall allow a registered youth player to play for a senior team in a league or adult cup game without affecting the player's youth registration status. (Reference BC Soccer Rules & Regulations RULE 9 – PERMITS). |

| OFFICE USE ONLY | |
|-----------------|---------------|
| Date Received: | Processed by: |