## **NEBRASKA STATE SOCCER ASSOCIATION**

## www.nebraskasoccer.org

10700 Sapp Brothers Drive – Suite B • Omaha, Nebraska 68138 • Phone (402) 596-1616 • Fax (402) 596-0660

## **K.I.S PROGRAM**

Keep it Simple

## **Transfer Form**

Word Template: You can type in this form before printing out form, use the tab key to move from field to field. This will give you a typed form to send.

Directions for Form – *Type or Print Clearly* – *see Word Template above*:

- 1. Parent of player contacts Current Team Registrar to start paperwork. Parent must give a reason for the transfer and get player pass from current coach.
- 2. Current Team Registrar fills out Section A. After Current Team Registrar gets Original Player Pass from parent attach it to form and mail to New Team Registrar.
- 3. New Team Registrar fills out Section B and mails form to State Office for processing; make sure original pass is attached.

  Registrar Note! Transfer Forms will not be processed without Original Player Pass being mailed in, do not fax a copy of this form,

  Mail with Original Player Pass to: NSSA 10700 Sapp Brothers Drive Suite B, Omaha NE 68138. There will be a \$4.00 charge for a lost pass.

Section A To be filled of	ut by Current Registi	rar – Team to be d	ropped from		
PLAYER'S NAME:			PLAYER		
PARENT(S) NAME:			номе рн		er on Player Pass
			WORK PH	ONE: (	
<b>TRANSFER REQUEST:</b> Player is being removed from current roster; I have included Original Player Pass and stated the reason for the transfer.					
CURRENT TEAM INFORMATION:					
TEAM ID: TEA	M NAME:		CLUB: [		
COACH:		AGE GROUP:	U	MALE	FEMALE
REASON:					
The Player 🗌 was or 🔲 was not rostered to a team which participated in the Nebraska Championships (State Cup)					
☐ I have been contacted by the parents of the above-mentioned player or have contacted the p and they want to transfer their child to the team listed below. I have contacted their current coac approval of transfer.  CURRENT REGISTRAR SIGNATURE:  Section B To be filled out by New Team Registrar - Team to be transferred to.					
NEW TEAM INFORMATION:					
TEAM ID: TEA	M NAME:		CLUB: [		
COACH:		AGE GROUP:	U	MALE	FEMALE
NEW REGISTRAR STATEMENT:  I have been contacted by the parents of the above mentioned player and have contacted their current team Registrar to fill out Section A of Transfer Form. We are requesting that the above-mentioned player be transferred to their new team.					
NEW REGISTRAR SIGNATURE:			DATE:		
Attach Pass Here: There will		-		DATE	E STAMP:
Transfer Completed: DATE:					













