

Fort Saskatchewan Soccer

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Player Movement Request Form

For more information see Fort Saskatchewan Soccer Policy 120 - Player Movement

Only player movement requests made on this form and delivered to the Fort Saskatchewan Minor Sports Association office <u>prior to the close of registration</u> will be reviewed.

All players are expected to register within their age division. All requests will be reviewed per our Player Movement Policy by our Technical Committee <u>after registration closes</u>.

A Physician's letter must accompany this form for all downward movement requests.

Date of Request:	
Name of Player:	
Player's Date of Birth:	
Requesting to play in which Age Ca	ategory:
Reason for Request: (This information	on will be kept confidential)
Name of person making the reques	st:
Relationship to Player:	
Contact Number:	Contact e-mail: