



APDL AFFILIATE/TRIALIST FORM

Any player not on an APDL Approved roster must complete this form and submit it to the relevant ASA Administrator for approval: stoporowsky@albertasoccer.com.

If an APDL club requires an emergency trialist, to meet the minimum 14 eligible players guideline, this form must be submitted to the APDL Administrator electronically before kick-off of the affected match.

The eligibility of the trialist is subject to review and penalties to the APDL club.

Affiliated Player: shall mean a player who is called up to participate in a game or games with a team they are not registered to but are a member of the same club.

Trialist Player: shall mean a player who is called up to participate in a game or games with a team that they are not currently registered with and is outside of their home club, with the aim of registering with that team.

Player Name: _____

Date of Birth (D/M/Y): _____ Player Card #: _____

Youth Club: _____ Age Group: _____

Program: EMSA ___ EIYSA ___ CMSA ___ OTHER (SPECIFY): _____

I, _____ (Players Home Club Technical Director),

hereby give permission for _____ (youth player) to play as an

affiliate/trialist for _____ (AYSL Club) _____ (Age Group) on

_____ (D/M/Y).

Affiliate Player

How many games has this player been used as a trialist (please circle):

1st 2nd 3rd 4th 5th

Technical Director Signature _____