 **Lakeland Adult League Play
Trialist/Guest Player Form**

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| **Please include all guest players on this form.**  |
| **This form must be given to the referee prior to the game and submitted with the game sheets to the LDSA Executive Director.****Email :** **execdir@lakelandsoccer.ca** 1. All trialist/guest players should be indicated on each game sheet.
2. Female trialist/guest players may be unlimited in a season in order to field the minimum number of female players required per game.
3. Male trialist/guest players shall not exceed the number of male players on the roster. No more than a total of 4 such players can be recruited for any 1 game.
4. A trialist/guest player form should be completed indicating each guest player and provided to the referee with the game sheets.
5. A registered Youth player will not be considered cup-tied for a Provincial Championships to any team if they have participated on as a trialist prior to having registered with a Senior team. LDSA Trialist/Guest player rules should be followed.
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| 1. Player’s Name:
 |  | Current Team Name : |  |
| Date of Birth: |  | Current Division & Tier : |  |
| By signing, the team official of the **current team** has given permission for the above player to play as a trialist on the below-mentioned team: | Signature of Current Coach or Team Official: |  |
| 1. Player’s Name:
 |  | Current Team Name : |  |
| Date of Birth: |  | Current Division & Tier : |  |
| By signing, the team official of the **current team** has given permission for the above player to play as a trialist on the below-mentioned team: | Signature of Current Coach or Team Official: |  |
| 1. Player’s Name:
 |  | Current Team Name : |  |
| Date of Birth: |  | Current Division & Tier : |  |
| By signing, the team official of the **current team** has given permission for the above player to play as a trialist on the below-mentioned team: | Signature of Current Coach or Team Official: |  |
| 1. Player’s Name:
 |  | Current Team Name : |  |
| Date of Birth: |  | Current Division & Tier : |  |
| By signing, the team official of the **current team** has given permission for the above player to play as a trialist on the below-mentioned team: | Signature of Current Coach or Team Official: |  |
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| Name of Team Trialist is Playing for: |  | Team’s Division & Tier: |  |
| Date(s) Given Permission to Play: |  | Tournament Name (If Applicable): |  |