



APPLICATION FOR REINSTATEMENT

The Canadian Soccer Association

"Place Soccer Canada"

237 Metcalfe Street

Ottawa, ON

K2P 1R2

Phone: 613 237 7678 Fax: 613 237 1516

Name of Player: _____
Current Address: _____

Telephone Number: _____
Date of Birth: _____
Place of Birth: _____

Citizenship: _____

Date when applicant became a non-amateur/professional: _____

Club(s) with which the applicant has played as a non-amateur/professional and time played with each club:

Club for which the applicant last played as a non-amateur/professional: _____

Date of applicant's last match as a non-amateur/professional: _____

Has the applicant been reinstated before? _____ If yes, when: _____

Club for which the applicant desires to play: _____

Reasons for desiring reinstatement: _____

TO THE BOARD OF DIRECTORS OF THE CANADIAN SOCCER ASSOCIATION:

I desire to cease playing as a registered non-amateur/professional and apply for reinstatement as an amateur. I enclose \$125.00 for the application fee.

Signature of Player: _____ Date: _____

Approved by the: _____
Provincial Association / USL / MISL / MLS (please circle)

Date: _____
Provincial Secretary

Approved by the CSA: _____ Date: _____

Note: As per FIFA Rules and Regulations governing the status and transfer of players, players registered with other National Associations cannot be reinstated by this Association until an international transfer certificate has been secured from the previous National Association. Also, a player may not be classified as amateur until a period of thirty (30) days has elapsed. The interim period shall start from the day the player competed in his/her last match with the club with which he/she was last registered as a non-amateur.