2024 WYSA PRAIRIE SHOWCASE GUEST PLAYER FORM



PART 1: TO BE COMPLETED BY THE PLAYER

I, (player's name) hereby request permission
from the Under Boys/ Girls (circle one)
(The team you are currently registered with), which I am a registered player, to participate in the
2024 WYSA PRAIRIE SHOWCASE with the Under Boys/ Girls (circle one)
(team name & age of team you are guesting with).
PART 2: TO BE COMPLETED BY THE PARENT/GUARDIAN OF THE PLAYER
Parent / Guardian Name (Print):
Parent / Guardian Signature:
Date:
PART 3: TO BE COMPLETED BY THE TEAM COACH RELEASING THE PLAYER (PLAYERS CURRENT TEAM)
Coach Name (Print):
Coach Signature:
Date:
PART 4: TO BE COMPLETED BY THE RELEASING MEMBER ORGANIZATION
Name (Print):
Title:
Signature:
Date:
 PART 5: TO BE COMPLETED BY THE WINNIPEG YOUTH SOCCER ASSOCIATION
Name:
Date:
Authorization:

ALL GUEST PLAYER RELEASE FORMS MUST BE SUBMITTED TO THE WYSA OFFICE BY OCTOBER 16, 2024

ALL TEAMS MUST HAVE THEIR WYSA APPROVED GUEST PLAYER FORM(S) AT ALL MATCHES