Minor Restricted Movement Form

- ONE COPY of this form is <u>required</u> to be submitted for <u>each</u> youth player registered with CMSA who is
 playing up as a guest player to a CWSA team
- The youth player must have attained their 16th birthday on or before the date of the game
- If the youth player is a registered CWSA player, <u>do not use this form</u>. Instead consult the callup charts to ensure the player is eligible and record their name on the game sheet as a regular guest player.

Always consult the <u>CWSA callup charts</u> to ensure the guest player is eligible to play up with the CWSA team (eligibility is division dependant)

| Game Information: | | | | | | |
|-----------------------------|--------------------------------|---|-----------------|--|--|--|
| Game Date: | Name of Team | Name of Team Playing up For: | | | | |
| Player's Information | | | | | | |
| Player's Name: | | Player's Age: | | | | |
| Birth Date (mm/dd/yyyy): | | CMSA ID Number: | CMSA ID Number: | | | |
| Player's Team Name: | | Tier/Division: | Tier/Division: | | | |
| Authorisation of Player's C | oach / Manager / Parent: | | | | | |
| | | print full name | signature | | | |
| Referee Signature: | | | | | | |
| | This form must be filled out i | in its entirety. Photocopies are not acceptable | e. | | | |

Referee: Original copy to remain attached to the game sheet and submitted to the CWSA. Both teams are encouraged to photograph the form after the game for their records.



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|---|--------------------|------------------------------|-----------------|-----------|--|--|--|
| Game Date: | Name of Team Playi | Name of Team Playing up For: | | | | | |
| | · | | | | | | |
| Player's Information | | | | | | | |
| Player's Name: | | Player's Age: | | | | | |
| Birth Date (mm/dd/yyyy): | | | CMSA ID Number: | | | | |
| Player's Team Name: | | | Tier/Division: | | | | |
| Authorisation of Player's Coach / Manager / Parent: | | | | | | | |
| | | print full name | | signature | | | |
| Referee Signature: | | | | | | | |

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