



5:27:00

United States Soccer Federation, Inc.
International Clearance
Request Form (ITC 3-03)

MALE []
FEMALE []

A. BIOGRAPHICAL INFORMATION
(Type or print clearly)

Player's Last Name First Name Middle Initial
Mother's Maiden Name First Name Middle Initial
Father's Last Name First Name Middle Initial
Current United States Address City State Zip
Date of Birth Social Security Number
Month Day Year (optional) Place of Birth (City & State) Country
Citizenship Contact Number in the United States

B. REQUEST FOR INTERNATIONAL TRANSFER CERTIFICATE

Last Foreign Club Participated League State/Country
Date of Last Game Professional/Amateur Date Clearance Requested
Club Wishing to Participate With League State/Country

I hereby confirm all of the above information to be correct. I also confirm that I am presently not under a professional contract to any other team (domestic or foreign) and I am not under suspension by any member organization of Federation Internationale de Football Association.

Signature of Player Date
Signature of Parent or Guardian (if applicable) Date

Please complete and submit this form either by fax or mail to:

U.S. Soccer Federation, Inc.
Attn : Federation Services Department
1801 South Prairie Avenue
Chicago, IL 60616
312-808-1300
312-808-9263 fax