Instructions for Releases for Players
Who DO NOT Reside in Coppell or the CISD boundaries

CYSA boundaries are the city limits of Coppell and the Coppell Independent School District boundaries. Players residing inside these boundaries are considered residents to our association. Players living outside these boundaries are considered non-residents to our association and must be released from their home soccer association in order to play in CYSA.

Any returning or new player who is registered for the Fall 2014 season and resides outside the CYSA boundaries will not be placed onto a team until the required release procedures below have been completed and submitted to the CYSA office.

Due Date - July 8, 2014

Instructions for Neighboring Associations

I. Irving Residents who do not live inside the CISD boundaries:

**** NEW Procedure & Fee effective immediately – we're going all electronic!****

We will no longer accept checks and forms in the office for Irving players being released to CYSA.

1. You MUST pay the $41* fee online with your child's online registration for the Fall 2014 season.
   * $40 - Irving Soccer Association fee to register and release a player for the 2014-2015 soccer year
   + $1 – to cover credit card fees CYSA will incur for this $40 transaction.
2. Complete and sign both sections of the release form on page 2
3. Return it electronically to info@coppellyouthsoccer.com (The file MUST BE LESS THAN 300 KB) or fax to 972-304-8791.
4. CYSA will send Irving Soccer Association $40/player that pays online along with the electronic release form.

If you do not want to follow this procedure, you will need to visit the Irving Soccer Association office in person to complete the release steps and then email or fax a copy of your signed form to CYSA using the information is #3 above. Here is a link to the Irving Soccer Association website for their address and office hours – www.irvingsoccer.org CYSA WILL ONLY ACCEPT ELECTRONIC COPIES (scanned and emailed or faxed)

New players should also submit proof of age (birth certificate or passport) with this form.

II. Lewisville, Flower Mound, Highland Village Residents: FREE

Submit the following to CYSA Office*:

1. Release Form - Fill out only the top portion on the next page.
2. New Players must include a copy of the player's state issued birth certificate or passport

CYSA will fax your paperwork to GLASA on your behalf.

III. Carrollton/Farmers Branch Residents:

1. Contact the CFBSA at office@cfbsoccer.net or 972-245-9307 to find out the procedure to obtain a release from their soccer association.
2. Once you have the NTSSA Release Form signed by an agent of CFBSA, email it to info@coppellyouthsoccer.com OR fax it to CYSA at 972-304-8791.

Other Non-Coppell Residents:

Contact your local soccer association or CYSA for instructions.

CYSA Contact Information

Email: info@coppellyouthsoccer.com
Fax: 972-304-8791
Office: 972-304-0886

All non-resident players – complete the top portion of this form.

****Irving Residents fill out the top AND bottom portion of this form.***

NORTH TEXAS SOCCER
"IGNITING PASSION FOR THE GAME"

RELEASE FORM

Affiliated with the United States Federation and Federation Internationals de Football Association

Player's Legal Name:				**Rec. X**		**Boys**	**Girls**
Address:			**Phone #:**	( ) -		**Date of Birth:**	/ /
City		**State: TX**	**ZIP Code:**			**Team Age Group:**	**U-**

Player Registration #: *(for office use only)*	**Parent Email:**

REASON FOR RELEASE

3. Player/Team requesting Release from Home Association: (North Texas Soccer does not sign for this Release, fax to your Releasing Association)

Name of Releasing Association:		**Name of Receiving Home Association:**	**CYSA**
A. No team available:		**B. Player remaining on prior team in another Assn.:**	
C. Other reasons (attach details on separate sheet if needed):			

SIGNATURES

X Parent Signature:_____**Date:**_____

Home Assoc. Signature:_____**Date:**_____

****For players residing outside of the CISD boundaries in Irving:*** *Complete the top and bottom portions of this form and send it to info@coppellyouthsoccer.com or Fax to 972-304-8791 before July 8, 2014. There is a $40 fee to be released from ISA which should have been paid online with each player's CYSA registration.*

Last Name First Name

Street Apt# City

Zip Code Phone Male/Female Birth Date

Father's Name Work Phone Cell Phone

Mother's Name Work Phone Cell Phone

IMPORTANT

We hereby certify that the above information is true and correct. We realize this soccer program is a nonprofit and voluntary program, instituted for the benefit of the youth in the community and we therefore agree to hold no party connected with the team, sponsors, or the league responsible for the injury or harm to the participant during the normal pursuit of team activities. Participation in league activities, playing or practicing, shall not be allowed until this contract has been signed. We, the undersigned do hereby agree to abide by the constitution and playing rules of the league.

Name: _____ Signature: X_____ Date: _____
Parent/Legal Guardian (please print)