



NISL PLAYER PERMISSION FORM

This Player Permit is for use by the team borrowing the Northern Illinois Soccer League (NISL) / Illinois Youth Soccer(IYSA) / US Youth Soccer (USYS) registered player who has been given permission by his/her NISL/IYSA/USYS registered (Lending) Team coach to participate as a player in an IYSA/USYS soccer activity (tournaments, tryouts, indoor games, practices, etc.) with the Borrowing Team. This Player Permit is valid only for the soccer activity and dates indicated herein. IYSA registered players that participate in soccer activities that are not sanctioned by NISL/IYSA/USYS and/or teams that are not currently registered with IYSA/USYS are not covered by IYSA insurance. THIS FORM MUST BE SUBMITTED TO NISL ILLINOIS YOUTH SOCCER WITH A COPY TO THE BORROWING TEAM. NO APPROVAL WILL BE GRANTED UNTIL THIS FORM IS FULLY COMPLETED AND SIGNED.

1. Enter the required information as specified. Use separate form for each player, activity, date, location, coach, team.
2. The Player must be a currently registered IYSA/USYS player who has been loaned by his/her registered (Lending) Team coach to play as player with the Borrowing Team for the activity indicated. The Player must use the player pass from his/her IYSA/USYS currently registered league team.
3. The information on the player's pass must match the information provided in this Player Permit.

Name of Activity: _____ Soccer Activity Date(s) _____
 Activity Location (City,State) _____
 Name of Borrowing Team _____ BOYS GIRLS U- _____ League _____
 Print Name of Borrowing Team Coach _____ Coach's Pass _____
 Coach's Address _____ City, _____ State, _____ Zip _____
 Home Phone (_____) _____ Work Phone (_____) _____ Email _____

Print Player's Name _____ Birthdate _____ NISL/IYSA/USYS Pass _____
 Name of Player's Lending Team _____ BOYS GIRLS U- _____ League _____
 Player's Street Address _____ City, _____ State, _____ Zip _____
 Player's Parent/Guardian Signature _____
 Home Phone (_____) _____ Email _____

Print Name of Lending Team Coach _____ Coach's NISL/IYSA Pass # _____
 Coach's Address _____ City, _____ State, _____ Zip _____
 Home Phone (_____) _____ Work Phone (_____) _____ Email _____

By his/her signature the Player's Registered (Lending) Team Coach grants permission for the Player to participate with the borrowing team in the soccer activity listed herein.

Signature of Lending Team Coach _____ Date _____

By submitting this Player Permit to NISL, I the Borrowing Team Coach hereby certify that I have obtained written permission from the Player's IYSA/USYS currently registered team coach (Lending Coach) for use of the Player for the activity listed herein and have obtained approval from the NISL. I further attest that I am in compliance with Illinois Youth Soccer policies, procedures, rules and requirements and that the information provided by me is correct. I understand that false, misleading or inaccurate information and/or noncompliance with IYSA rules and procedures will result in the Player's IYSA insurance coverage being voided and I being placed in bad standing with Illinois Youth Soccer.

Borrowing Team Coach's Signature _____ Date _____