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## UNDER 19 PLAYER PERMISSION FORM (For Youth Players NOT Registered on a Youth Team)

I, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
Print Full Name Social Security Number Birthdate

Request permission to play for: \_\_\_\_\_, \_\_\_\_\_  
Senior Team Division

I understand that it is my responsibility to obtain the necessary permission and signatures and proof of age, which shall consist of a birth certificate, board of health records, passport, alien registration card, or drivers' license.

\_\_\_\_\_  
(Signature of Youth Player) Date

\_\_\_\_\_  
Address City State Zip Phone

I, as parent/legal guardian, of the above-named youth player, give my permission for him/her to play and to be registered as an amateur player on a USSF Amateur Division Team.

\_\_\_\_\_  
(Signature of Parent/Legal Guardian) Print Full Name Date

Guardian address Same as above Yes / No

\_\_\_\_\_  
Address City State Zip Phone

Senior Team Representative: Please note that allowing a youth player to play/practice on a senior team before this form has been approved will result in forfeiture of matches and disciplinary action from the league. Also, the youth player will not be allowed to compete with the senior team for any USSF Cup Competition or OSA State Competitions.