



U.S. Soccer Federation International Clearance Request Form (ITC 5-11)

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	
Most Recent United States Address	City	State	Zip Code
E-mail Address	Primary Phone Number		
Birth Date	Gender	Male / Female	
<div style="display: flex; justify-content: space-between; width: 100%;"> Month Day Year </div>			
Country of Birth	Country of Citizenship		

B. REQUEST FOR INTERNATIONAL TRANSFER CERTIFICATE

(This section **MUST** be completed or the application will **NOT** be processed)

Last Foreign Club Participated	State/Country	League
Date of Last Game	Professional/Amateur	
<div style="display: flex; justify-content: space-between; width: 100%;"> Month Day Year </div>		
Club Wishing to Participate With	State/Country	League

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: Month Day Year
Signature of Parent or Guardian (Required for any player under the age of 18)	Date: Month Day Year

Please complete and submit this form by mail, e-mail or fax to:

U.S. Soccer Federation
Attn: Player Registration
1801 South Prairie Avenue
Chicago, IL 60616
312-808-1300
312-808-9263 Fax
player_registration@ussoccer.org