



TEAM OFFICIAL DECLARATION FORM

TEAM OFFICIAL INFORMATION

Coach ID #: _____ Birthdate (YY-MM-DD): _____

Surname: _____ Given Names: _____

Current Address: _____

Postal Code: _____ Phone Number: _____

1. MEMBER CLUB/TEAM INFORMATION

Boys or Girls: _____ Age Group and Tier(s): _____ Name of team(s): _____

Print Name of Member Club President or Registrar: _____

Signature: _____ Date: _____

By signing this form, Member Club does acknowledge and permit the team official to be included on rosters for multiple Member Clubs in accordance with CMSA Rules and Regulations Section IV.B.8.

2. MEMBER CLUB/TEAM INFORMATION

Boys or Girls: _____ Age Group and Tier(s): _____ Name of team(s): _____

Print Name of Member Club President or Registrar: _____

Signature: _____ Date: _____

By signing this form, Member Club does acknowledge and permit the team official to be included on rosters for multiple Member Clubs in accordance with CMSA Rules and Regulations Section IV.B.8.

CMSA Authorization Signature: _____ **Date:** _____

If any of the above information is missing, the transfer will automatically be declined.
Please refer CMSA Rules and Regulations on restrictions regarding Team Official cross-club registration.