

US Youth Soccer /Ohio South State Cup Team/Player/Coach Eligibility Verification Form

State Association: _____

Team Name: _____

Age Group: Under _____ Boys Under _____ Girls

I hereby certify that all players on my Official OSYSA roster are properly registered and rostered and are eligible to participate in the US Youth Soccer Ohio South State Cup. I certify that none of the players or coaches is currently under suspension for any reason. I further certify that no player or coach was sent off in their last US Youth Soccer National Championships match which includes the Ohio South State Cup, US Youth Soccer Midwest Regionals, or US Youth Soccer National Championships match unless indicated below. If any player or coach was sent off, I have listed their names in the box provided and understand that the individuals listed cannot under any circumstances participate in their first Ohio South State Cup match.

Any National State Association or sanctioned league may provide that penalties in excess of a one (1) game suspension may be assessed and any such suspension shall be recognized at the US Youth Soccer Ohio South State Cup.

Suspension Information			
Name	Player Jersey No.	Coach	Duration of Suspension (i.e. 1 game – 2 games etc.)

Coach Name (Print) _____

Signature: _____ **Date:** _____

(MUST be signed by a Team Coach or Manager and dated day of match.)

Note: If it is determined that an ineligible player or coach participates in a Ohio South State Cup, the match will be forfeited. If a coach knowingly falsifies information on this form, a hearing shall be held by the Ohio South Youth Soccer Association and additional penalties may be assessed.

**The US Youth Soccer National Championship Rules
will be interpreted by the members of the National Championship Committee**

Note: This Team/Player/Coach Eligibility Verification Form **MUST** be completed prior to each game at the Ohio South State Cup. This form must be given to the proper authority.