



**United States Soccer Federation, Inc.
International Clearance
Request Form (ITC 3-03)**

MALE
FEMALE

A. BIOGRAPHICAL INFORMATION
(Type or print clearly)

<hr/>			
Player's Last Name	First Name	Middle Initial	
<hr/>			
Mother's Maiden Name	First Name	Middle Initial	
<hr/>			
Father's Last Name	First Name	Middle Initial	
<hr/>			
Current United States Address	City	State	Zip
<hr/>			
Date of Birth	Social Security Number		
____/____/____	____/____/____		
Month	Day	Year	(optional)
____			____
Place of Birth (City & State)			Country
<hr/>		<hr/>	
Citizenship		Contact Number in the United States	

B. REQUEST FOR INTERNATIONAL TRANSFER CERTIFICATE

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Last Foreign Club Participated	League	State/Country
<hr/>		
Date of Last Game	Professional/Amateur	Date Clearance Requested
<hr/>		
Club Wishing to Participate With	League	State/Country

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.

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Signature of Player	Date
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Signature of Parent or Guardian (if applicable)	Date

Please complete and submit this form either by fax or mail to:

U.S. Soccer Federation, Inc.
Attn : Federation Services Department
1801 South Prairie Avenue
Chicago, IL 60616
312-808-1300
312-808-9263 fax