



# Missouri Intra-Club Guest Player Form

*This document is only valid for guest players between teams that are within the same competitive club.*

This document must be signed by both coaches to be valid and be accompanied by the USYS Player Pass and a signed copy of the player's Medical Waiver & Liability Form. This form only applies to Primary Roster Players

**CLUB NAME:** \_\_\_\_\_ **Guest Team Name:** \_\_\_\_\_

Player Name	Player ID Number	Name of Primary Team Rostered	Player Gender/Date of Birth
1)			
2)			
3)			
4)			

Name of Event Participating: \_\_\_\_\_ Dates: \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

Loaning Head Coach Name: \_\_\_\_\_ (print) Signature: \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Guest Head Coach Name: \_\_\_\_\_ (print) Signature: \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

*Authorization to Guest Play may only be granted by the Primary Team Head Coach & is only valid on the dates provided above.*