



Cosmopolitan Soccer League

115 RIVER ROAD * SUITE 1029 * EDGEWATER, NJ 07020 * 201-943-3390 * FAX: 201-943-3394

AMATUER PLAYER PASS RELEASE FORM

_____, 20____

To the State Registrar:

Amateur player _____ I.D. No. _____

Address _____ City & State _____

Is hereby released from the _____ Soccer Club
of the _____ League

Signature of the Club Secretary _____

Address _____

City & State _____

Release approved and granted:

Date _____

Signature _____
(State Registrar)

INSTRUCTIONS: This form must be executed in ink by the secretary of the club which desires to release the player. The release fee to be charged, the place and time limit for filing releases, and other release conditions shall be in accordance with the rules and regulations of the United States Soccer Federation and the United States Adult Soccer Association and their state affiliates.