

LOUISIANA SOCCER ASSOCIATION
ADULT DIVISION
TRANSFER FORM - TRANSFER FEE \$5.00

I (print name) _____

Player ID # _____

REQUEST TRANSFER FROM

_____ Soccer Team Name

New Orleans Coed Soccer LSA Affiliated Club Name

Division: Check one: Men's Open ☐ Men's over 30 ☐ Men's Over 40 ☐
Women's Open ☐ Women's Over 30 ☐ Co-Ed ☒

RELEASING TEAM REPRESENTATIVE SIGNATURE _____

RELEASING CLUB REGISTRAR SIGNATURE _____

AND TO BE TRANSFERRED TO

_____ Soccer Team Name

New Orleans Coed Soccer LSA Affiliated Club Name

Division: Check one: Men's Open ☐ Men's over 30 ☐ Men's Over 40 ☐
Women's Open ☐ Women's Over 30 ☐ Co-Ed ☒

PLAYER SIGNATURE _____ DATE _____

NEW TEAM REPRESENTATIVE SIGNATURE _____

NEW CLUB REGISTRAR SIGNATURE _____ DATE _____

Send to LSA with Updated Rosters and LSA Payment Form