

**HAWAII YOUTH SOCCER ASSOCIATION - HYSA**

**Drop/Transfer Request Form**

**Please complete this form and submit to the Registrar with the current player pass. All sections should be completed before submission. Coaches should retain a copy of completed form.**

Player's Name \_\_\_\_\_

Current Team Name \_\_\_\_\_, HYSA Team # \_\_\_\_\_ Division \_\_\_\_\_

Check ONE:

\_\_\_\_\_ **Request to Drop from above stated team. (List reason below)**

\_\_\_\_\_ **Request to transfer to the team listed below. (List reason below)**

Receiving Team Name: \_\_\_\_\_ HYSA Team # \_\_\_\_\_ Division \_\_\_\_\_

Reason for Drop or Transfer:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Player

\_\_\_\_\_  
Signature of Parent

2. I, releasing coach, support the above request

\_\_\_\_\_  
Signature of Releasing Coach

\_\_\_\_\_  
Date

3. I, receiving coach, support the above request

\_\_\_\_\_  
Signature of Receiving Coach

\_\_\_\_\_  
Date

4. I, President, approve the above request

\_\_\_\_\_  
Signature of President

\_\_\_\_\_  
Date

5. Records adjusted by Registrar

\_\_\_\_\_  
Signature of Registrar

\_\_\_\_\_  
Date