



U.S. Soccer Federation First Registration Form (FR-11)

_____ Player's Last Name		_____ First Name		_____ Middle Initial	
_____ Current U.S. Address		_____ City	_____ State	_____ Zip Code	
_____ Country of Birth		Gender Male / Female			
_____ Birth Date		E-mail Address _____			
Month	Day	Year			

I, _____, attest the following to be accurate:

- Are you a **CITIZEN** of the United States? Yes _____ No _____
- Have you ever been registered with **ANY** team outside of the United States? Yes _____ No _____

Team to participate with _____ South Kendall Sunblazer's Soccer

League _____ ASSFU / ASMDL / ASXDY

State Association _____ FYSA (Florida Youth Soccer Assoc)

By executing this form, I hereby represent that the information contained herein is true and correct.

By: _____
Signature of Player

Date: Month Day Year

By: _____
Signature of Parent or Guardian
(Required for any player under the age of 18)

Date: Month Day Year

Please complete and submit this form by mail, e-mail or fax to:
 U.S. Soccer Federation
 Attn: Player Registration
 1801 South Prairie Avenue
 Chicago, IL 60616
 312-808-1300
 312-808-9263 Fax
 player_registration@ussoccer.org