



2024 ASSOCIATION TRANSFER REQUEST FORM

IMPORTANT: YOU MUST REGISTER YOUR CHILD IN THE ASSOCIATION THAT HE/SHE ATTENDS SCHOOL IN, WITH REGISTRATION YOU WILL ALSO SUBMIT THIS FORM AND ALL REQUIRED DOCUMENTS. {UPON APPROVAL OF TRANSFER YOU WILL BE RESPONSIBLE FOR ANY DIFFERENCE IN PRICES BETWEEN ASSOCIATIONS BEFORE YOUR CHILD IS PLACED ON A ROSTER.}

Every Inland Northwest Youth Football & Cheer (INYFC) League Association has defined geographical boundaries. INYFC Associations shall register candidates who reside within the geographic boundaries of the Association. In the event a candidate for registration attends school outside the boundaries of the Association, the submission and APPROVAL of this Association Transfer Request Form is required with registration. Approval of the Association Transfer requests are granted on a case-by-case basis and are in force for one (1) season. Association Transfer Requests MUST be renewed annually. **No candidate for registration is permitted to enroll in an Association other than the candidate's Home Association without this signed and approved form.**

Instructions:

1. Complete the Association Transfer Request Form in FULL. Please PRINT CLEARLY.
2. Submit a copy of the Association Transfer Request Form to both the granting and accepting Association Presidents.
3. The following Signatures are required before the candidate for registration is allowed to transfer:
 - a. The Assoc. President where the candidate wishes to register MUST sign to accept the candidate's request.
 - b. The Assoc. President where the candidate resides MUST sign to release the candidate from the home association.
 - c. INYFC League Board Member, either the INYFC President or Scholastics Commissioner.
4. Upon approval, the signed Association Transfer Request Form must be emailed to the INYFC Scholastics Commissioner and is required for team certification.

Section 1: Participant's Information:

Player/Cheerleader Name: _____ Date of Birth: _____

Sport: Football / Cheer Division: 2nd Grade / 3rd/4th Grade / 5th/6th Grade / 7th Grade / 8th Grade

Address: _____

City: _____ State: _____ Zip: _____

Home Phone Number: _____ Cell Phone Number: _____

Email Address: _____

Have you ever participated in INYFCL in prior seasons? Yes No

If yes, which Association? _____ Year? _____

If this Request is approved, in which Association do you wish to participate? _____

Section 2: Reason for Association Transfer Request:

In order for an Association Transfer to be granted, there must be a valid reason. Please note that valid documentation must accompany this form in order for the request to be approved. Failure to provide any of the requested documents will result in the automatic denial of this Association Transfer Request. **PLEASE NOTE: PRIOR TEAM PLACEMENT IS NOT A GUARANTEE FOR A TRANSFER.**

Check one box only: The candidate attends school on a valid school permit outside the boundaries of the requested Association. MUST SUBMIT COPY OF CURRENT SCHOOL PERMIT AND/OR CURRENT REPORT CARD.

Other: (Provide explanation): _____

Assoc. Granting Release: _____ President Signature: _____

Assoc. Accepting Transfer: _____ President Signature: _____

League Board Member's Title: _____ League Signature: _____

Section 3: Parent's Verification and Signature:

I certify by my signature below that the information that I/we have provided to INYFC League is true and accurate and if found to be providing false or incomplete information or documentation, I understand that my child will be removed from the team/squad he/she is registered with and that the team/squad will forfeit all games/competitions in which my child participated during the current season.

Parent Signature: _____ Date: _____

Printed Parent Name: _____