



Tournament Guest Player Form



Tournament Name Metros FC Soccer Tournament 2024
Tournament Location Rochester, NY Tournament Dates July 19-21, 2024
Name of Tournament Team _____ Age Division _____
Coach's Name _____ Phone _____
Address _____ City _____ State _____ Zip _____

Player's Name	Date of Birth	Jersey Number	Guest Player's Home Club	Player Pass Number

I hereby certify that the above information is true and correct.

(Signature of Coach or Manager)

(Date: mm/dd/yyyy)

Approved: New York State West Youth Soccer Association

For Office Use Only

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Instructions:

1. Enter the all required information in the form.
2. On the tournament roster, draw a line through the player being replaced.
3. Guest players must use the player pass from their home club and information must match what is on this Tournament Guest Player form.

This tournament guest player form is for use in tournaments which have approved the use of guest players in their tournament application. This form is valid ONLY for the tournament and dates indicated above.