# United States Soccer Federation, Inc. International Clearance Request Form (ITC 3-03)

☐ **MALE**
☐ **FEMALE**

**A. BIOGRAPHICAL INFORMATION** (Type or print clearly)

Player's Last Name First Name Middle Initial

Mother's Maiden Name First Name Middle Initial

Father's Last Name First Name Middle Initial

Current United States Address City State Zip Date of Birth Social Security Number // // Month Day Year

(optional) Place of Birth (City & State) Country

Citizenship Contact Number in the United States

**B. REQUEST FOR INTERNATIONAL TRANSFER CERTIFICATE**

Last Foreign Club Participated League State/Country

Date of Last Game Professional/Amateur Date Clearance Requested

Club Wishing to Participate With League State/Country

I hereby confirm all of the above information to be correct. I also confirm that I am presently not under a professional contract to any other team (domestic or foreign) and I am not under suspension by any member organization of Federation Internationale de Football Association.

Signature of Player Date

Signature of Parent or Guardian (if applicable) Date

**Please complete and submit this form either by fax or mail to:**

U.S. Soccer Federation, Inc. Attn :
Federation Services Department 1801
South Prairie Avenue Chicago, IL
60616 312-808-1300 312-808-9263
fax