



Request To Over Roster



The top portion must be completed and given to your Club Registrar to keep on file.

The _____ coached by _____
Team code (Ex. BLM16GC201) print coach's name
requests permission to over roster.

Day Phone: _____ Eve. Phone: _____ Fax: _____

No over rostering will be allowed at the premier level. Over rostering will not be allowed at the Classic 1 level below the Under 17 age level. Over rostering is limited to the lowest division team at an age level.

For example, if your club's lowest level in the Under 13's is a Classic 3 team, that is the team over rostering will be considered. The Classic 2 team in that age bracket will not be allowed to over roster.

U9 and U10 teams may over roster by no more than one person, U11 and U12 teams may over roster by no more than two people.

State the reason for over rostering in the space below:

Player's Name (please print)	Date of Birth	Parent's Name	Parent's Signature (mandatory)

I (We) the above signed parent(s) understand that my(our) child(ren) is(are) the overrostered player registered on this team. As such, they may not replace an originally registered player who is available to play for the purposes of post season play. Teams that are overrostered MUST declare which 18 players for U13 and higher, and which 14 players for U11 and U12 will comprise the team for the purposes of District and State Tournament play prior to the start of the District Tournament, even if the team has an automatic seed to the State Tournament.

Printed Name of Affiliate Member President: _____ Date: _____

Signature of Affiliate Member President: _____

Any request for U13 and higher teams with more than two over rosters per team must be sent to the District Director in charge of the league for Committee approval. Please fax this form to the District Director in charge of the league to which the team is assigned.

Player's Name (please print)	Date of Birth	Parent's Name	Parent's Signature

The above statement also applies to the parents of the 3rd and 4th over rostered player(s) per team.

The District Operating Committee _____ Approved _____ Disapproved this request on

Date of decision Signed: _____ Signature of District Director District: _____

By signing this form you recognize that all MYSA league games and tournaments have a maximum number of players that can be dressed for each match. Please see the Rules and Policy Manual for specifics.