

Capital Area Soccer League - Player Dual Registration Form

All fields are required
Dual Registrations are not permitted BY MSYSA during May, June, October and November!

Player's Legal First & Last Name: _____

Player's Date of Birth: _____

Street Address: _____

City: _____ State: _____ Zip: _____

E-mail Address: _____ Phone Number: _____

PRIMARY TEAM

Team Name: _____

Team Age Group: _____ Gender: _____

League Name: _____

Coach's Name: _____

Coach's E-mail: _____

SECONDARY TEAM

Team Name: _____

Team Age Group: _____ Gender: _____

League Name: _____

Coach's Name: _____

Coach's E-mail: _____

- The team with which a dual rostered player first registers shall be designated his/her primary team and the other team his/her secondary team. If one team is in the MSYSA State Cup, MSPSL or MRL it must be the Primary team.
- A player may not play for more than one team in CASL. If the Clubs of the two teams disagree on the designation of the primary team, the player may not play until the issue has been resolved by the Leagues involved.
- Any Club registering a Player without informing CASL that the Player is already registered with another team forfeit all games for the team on which the Player played without an approved Dual Registration.

Player (if 18) or Parent's Signature & Date: _____

Primary Team Club Signature & Date: _____

Secondary Team Club Registrar Signature & Date: _____

Primary League Official Signature & Date: _____

