

## SouthWest Soccer Association Player Withdrawal Form

Please complete this form to help us better understand the reason for the withdrawal. This form will also be used to audit our financial records.

Adult who is withdrawing registered child/children	
Name:	Home phone:
Work phone:	Cell phone:
Address:	
Signature:	Date:

Child to be withdrawn	
Name:	Home phone: <input type="checkbox"/> same
Address: <input type="checkbox"/> same	Team (Division, Name)
Reason for withdrawing:	
Coach's Signature:	Date:

Child to be withdrawn	
Name:	Home phone: <input type="checkbox"/> same
Address: <input type="checkbox"/> same	Team (Division, Name)
Reason for withdrawing:	
Coach's Signature:	Date:

List additional children or information on reverse side.

SWSA Use Only	
Date received:	Received by:
Uniform order placed already? (Y / N)	Date of opening day:
Refund Amount: \$	SWSA Check Number:
Notes/Action:	