



Provincial Championship Player Pick-up/Permit Request Form

SUBMISSION INSTRUCTIONS		
<ul style="list-style-type: none"> Please see Rule 4d. Team Rules- Player Pick ups – Youth Provincial Competition Rules and Regulations https://www.bcsoccer.net/competitions/provincial-championships/ Complete section 1-4 and then submit to your Youth District for approval, the Youth District will then forward the request onto BC Soccer for review. If approved the team applying for the player pick-up will be contacted. Please attach all necessary supporting documentation (letter from parent or Doctor) to this form. Forms improperly or not fully filled out will be automatically rejected 		
Submit to the attention of:	Competitions	
Submit via one of the following:	1) Mail	BC Soccer Association Office 600-777 Hornby St, Vancouver, BC, V6Z 1S4
	2) Email:	competitions@bcsoccer.net

TEAM INFORMATION							
Name of Team applying to pick up a player:							
Club Name:			Name of Youth District:				
Competition your team is competing in:							
Team	Boys	Girls	Provincial Premier Cup		Provincial A Cup	Provincial B Cup	Other
	U14		U15	U16	U17	U18	Other
Name of Team Official requesting pick-up:							
Position:							
Phone:			Mobile:				
Email:			Fax:				
Signature:			Date (dd/mm/yyyy):				

UNAVAILABLE PLAYER INFORMATION	
Name of player unavailable:	
Date of Birth (dd/mm/yyyy):	Player ID#:
Reason for unavailability:	
Parent/Guardian Name:	
Parent Signature:	Date (dd/mm/yyyy):
Please attach letter from the player's parent/guardian confirming the player's unavailability.	

REQUESTED PICK UP PLAYER INFORMATION							
Name of player requested for pick up:							
Date of Birth (dd/mm/yyyy):			Player ID#:				
Current Club:			Current Team				
Current Division	Boys	Girls	Provincial Premier Cup		Provincial A Cup	Provincial B Cup	Other
	U14		U15	U16	U17	U18	Other
Name of Current Team Official:							
Position:							
Phone:			Mobile				
Email:			Fax:				

YOUTH DISTRICT APPROVAL	
District Chair/Registrar Name:	
Phone:	Mobile
Email:	Fax:
Signature:	Date (dd/mm/yyyy):



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PROVINCIAL APPROVAL	
Name of BC Soccer Official:	
Position:	
Signature:	Date (dd/mm/yyyy):