



**Newfoundland and Labrador Soccer Association
Certification of Player/Team Credentials Form**

To: Newfoundland and Labrador Soccer Association

Date: _____

We have checked our records thoroughly and are able to sanction the credentials of all players (age and eligibility) listed on the official playing roster for the following team:

_____ Team

The team is in good standing with our region and we endorse their participation in the following Provincial/Regional Tournament:

_____ Tournament

- | | |
|-----------|-----------|
| 1. _____ | 11. _____ |
| 2. _____ | 12. _____ |
| 3. _____ | 13. _____ |
| 4. _____ | 14. _____ |
| 5. _____ | 15. _____ |
| 6. _____ | 16. _____ |
| 7. _____ | 17. _____ |
| 8. _____ | 18. _____ |
| 9. _____ | 19. _____ |
| 10. _____ | 20. _____ |

Coach: _____ Qualification: _____ CPIC Y N

Assistant Coach: _____ Qualification: _____ CPIC Y N

Manager: _____ CPIC Y N Physio/Trainer _____ CPIC Y N

_____ Signature of Regional Representative

Original copy of this form and the registration fee of \$150.00 (U8-10), \$300 (U12-14), \$300+HST (U16-18), \$350+HST (Senior) per team must be received at the NLSA office 14 days prior to the start of the tournament.

Team Information Sheet
(To be submitted with Credential Sheet)

Name of Team: _____

Team Colors: _____

Coach Information:

Name: _____

Address: _____

Email: _____

Phone Numbers: _____ (Home)

_____ (Work)

_____ (Fax)

_____ (Cell)

Assistant Coach Information:

Name: _____

Address: _____

Email: _____

Phone Numbers: _____ (Home)

_____ (Work)

_____ (Fax)

_____ (Cell)

Manager Information:

Name: _____

Address: _____

Email: _____

Phone Numbers: _____ (Home)

_____ (Work)

_____ (Fax)

_____ (Cell)

Other Team Contact Information: _____