



Player Movement Request Form

Follow steps 1 through 4 to complete your player placement appeal.

Step 1: Enter player information below

Player Name		Year of Birth	
Mailing Address		Postal Code	
		Telephone	
E-mail		Fax	

Step 2: Indicate the reason that you are requesting your team movement by checking the appropriate box below

<input type="checkbox"/>	Player has consistently played in a higher division than currently assigned
<input type="checkbox"/>	Travel convenience (players will not be moved to a higher division team to accommodate requests to play with another player, however players can be moved down a level of play to accommodate such requests)
<input type="checkbox"/>	Other reason (please specify below)

Step 3: Please provide any details that you would like considered. Please be brief and specific, use point form if possible. Print clearly.

Step 4: Please fax this completed form to 403.984.2970 or return to the Soccer Office at NSD 7475 Flint Road SE.

Please Note

No telephone calls will be accepted regarding movement requests. Results will be communicated via e-mail or posted letter.

Office Use Only

Request Result: Granted Refused

Comments: