

# ONTARIO SOCCER REINSTATEMENT APPLICATION FORM

(For Use by a Club Reinstating a Player to play on an Amateur Team)

Check one:  Non-Amateur to Amateur  Professional to Amateur

## PLAYER INFORMATION

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Prov.: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

## PLAYING HISTORY

When did the applicant become a Non-Amateur/Professional:  
Clubs with which the applicant has played as a Non-Amateur/Professional and period for each:  
1. \_\_\_\_\_ Dates: \_\_\_\_\_  
2. \_\_\_\_\_ Dates: \_\_\_\_\_  
3. \_\_\_\_\_ Dates: \_\_\_\_\_

Club for which the applicant last played as a Non-Amateur/Professional and when:  
Date of last game as a Non-Amateur/Professional with the above Club: \_\_\_\_\_

Has the applicant been reinstated before?  Yes  No If yes, when: \_\_\_\_\_  
Club for which the applicant desires to play: \_\_\_\_\_  
Club Contact: \_\_\_\_\_  
Club Telephone: \_\_\_\_\_  
Reason for Reinstatement: \_\_\_\_\_

## TO THE BOARD OF DIRECTORS – CANADA SOCCER

I desire to cease playing as a registered Non-Amateur/Professional and apply for reinstatement as an Amateur.

Signature of Player: \_\_\_\_\_ Date: \_\_\_\_\_  
District Association Approval: \_\_\_\_\_ Date: \_\_\_\_\_  
Ontario Soccer Approval: \_\_\_\_\_ Date: \_\_\_\_\_

## PERMIT TO PLAY PENDING REINSTATEMENT

This is to certify that, \_\_\_\_\_ a former Non-Amateur/Professional player is granted a permit to register as an amateur with \_\_\_\_\_ effective fourteen (14) days following date of issue, and pending reinstatement approval by Canada Soccer. The player is eligible to play once registered.

Issue Date: \_\_\_\_\_ Reinstatement Date: \_\_\_\_\_  
Ontario Soccer Approval: \_\_\_\_\_ Date: \_\_\_\_\_  
Canada Soccer Approval: \_\_\_\_\_ Date: \_\_\_\_\_



Play. Inspire. Unite.

