



# NEBRASKA STATE SOCCER ASSOCIATION

www.nebraskasoccer.org

10700 Sapp Brothers Drive – Suite B • Omaha, Nebraska 68138 • Phone (402) 596-1616 • Fax (402) 596-0660

## K.I.S PROGRAM

Keep it Simple

## Secondary Player Form

Word Template: You can type in this form before printing out form, use the tab key to move from field to field. This will give you a typed form to send.

Directions for Form – Type or Print Clearly – see Word Template above:

1. Coach requesting Secondary Player starts by contacting Primary Coach for permission to ask player to be Secondary Player.
2. Coach requesting Secondary Player fills out form, getting the information from the primary coach.
3. Coach requesting Secondary Player contacts the parents of the player and asks for their permission for the player to play secondary.
4. Coach requesting Secondary Player then gives form to their Club Registrar. Registrar checks to make sure form is filled out correctly.
5. Registrar mails or faxes form to State Office;
6. State Office will register player once paperwork is complete

Registrar Note! Forms will not be processed without all information filled in.  
Mail to: NSSA 10700 Sapp Brothers Drive - Suite B, Omaha NE 68138 or Fax to: 402-596-0660

PLAYER'S NAME: \_\_\_\_\_

PLAYER ID # \_\_\_\_\_

PARENT(S) NAME: \_\_\_\_\_

HOME PHONE: ( ) \_\_\_\_\_  
Number on Player Pass

WORK PHONE: ( ) \_\_\_\_\_

### SECONDARY PLAYER REQUEST:

*Coach is requesting to have this player as a Secondary Player for the below mentioned Team/Club/Coach for the current season (Fall and Spring). I have contacted the Primary Head Coach and received their approval.  
It is customary that if the primary team has a function that the Secondary Player participates with the primary team, unless the Primary Coach has given their approval.*

### PRIMARY TEAM:

TEAM ID: \_\_\_\_\_ TEAM NAME: \_\_\_\_\_ CLUB: \_\_\_\_\_

COACH: \_\_\_\_\_ AGE GROUP: U \_\_\_\_\_  MALE  FEMALE

I was contacted by the Secondary Coach and give my approval of the above-mentioned to play as a Secondary Player. I will discuss with the player my expectations of them in regards to their commitment to their Primary Team.

PRIMARY COACH SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

### SECONDARY TEAM:

TEAM ID: \_\_\_\_\_ TEAM NAME: \_\_\_\_\_ CLUB: \_\_\_\_\_

COACH: \_\_\_\_\_ AGE GROUP: U \_\_\_\_\_  MALE  FEMALE

### SECONDARY COACH STATEMENT:

I have contacted the Primary Coach and received their approval. I understand that if the state receives a complaint and I have not contacted the Primary Coach, I could be in violation of the recruiting rules and my club and I would be subject to penalty. I have filled out the form and I am requesting approval from Nebraska Soccer.

SECONDARY COACH SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

Date Stamp

