

US Youth PLW Sit-Out Form Verification

Completed forms must be Email to PLWReport@yahoo.com (preferred) or Fax to 918-627-2693

Player/Coach – Sit-Out Verification

DO NOT LEAVE THIS FORM WITH THE REFEREE OR OPPOSING COACH

Please print and fill out completely!

PLAYER NAME & # or COACH NAME _____
CLUB/TEAM _____
AGE GROUP _____ Boys _____ Girls _____
DATE OF GAME _____ OPPONENT _____
COACH / MANAGER _____ PHONE _____
COACH / MANAGER EMAIL _____
DATE OF PLAYER / COACH EJECTION _____

THE ABOVE NAMED PERSON **DID NOT** PARTICIPATE IN THE ABOVE GAME.

REFEREE _____ DATE _____
SIGNATURE _____

ROSTERED TEAM COACH / MANAGER _____ DATE _____
SIGNATURE (team serving suspension) _____

Provide to referee before start of game and collect back from referee after game. Do not leave with referee.

INSTRUCTIONS: This form must be completed and sent to PLW Discipline and Protest Chair if the person named is to receive credit for the “sit-out”. It must be received within 48 hours of the sit-out game. Failure to comply may result in additional suspension plus additional sanction. Please see top of form for locations to send form.

Questions contact: Marianne Ballard m.ballard@oksoccer.com or 405-850-9026

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