



Roster Drop Form

Date: _____

Team: _____

Manager: _____

Grade Division _____ Sanction # _____

Managers, please refer to RULE III-Individual Player Eligibility in the NYSSO Football Rule Book for complete eligibility rules.

Fill out this form for drops from your frozen roster. If a dropped player is being added to another roster after this drop, the Tournament Director must receive this drop form before he can be added to the new roster

All Add/Drops must be sent to Troy Wiseman via email (nkfl1@aol.com or troy.wiseman@nyssonet.net and approved prior to game time. If email is not available fax or mail will work, but it must be confirmed prior to your game time.

Please DROP the following player(s):

<u>Name</u>	<u>Birthdate</u>	<u>Grade</u>	<u>Person requesting the drop</u>

I acknowledge that all NYSSO rules for roster drops have been followed.

Manager's Signature: _____ Date: _____

The above drops have been approved on condition that all above information is correct.

State Director/NYSSO Executive: _____

Date: _____