2026 KICK FOR THE CURE

Player Registration Certification

The 2026 Kick for the Cure soccer tournament is sanctioned by USSSA and by rule each player participating in the tournament and listed on the team roster must be registered for 2026-2027 soccer season. The Kick for the Cure is an Unrestricted Tournament and accepts teams and players registered through USYS, AYSO, USSSA, USCS and all International Associations.

Each player on the roster is required to have a valid current year player pass and medical release (for players under the age of 18), and the coach or business manager must carry that player pass with them at all times and have them available for inspection at any time during the course of the tournament.

Each player must be listed on the team roster with the players name, national association registration player pass number, and jersey number. Acceptable forms of rosters are printed copies of State and or National association rosters, GotSport roster or a printed form containing all the above information.

At tournament check-in, each team must present a tournament roster with the above information for each player and a signed copy of this attestation. Player passes will not be checked at tournament check in.

Certification Attestation

Club name: _____

Team Name: _____

Team Age :_____ Team Sex:_____

Coach Name:_____

As the representative of the above-named team I attest that each player on the tournament roster has a current year valid player pass issued by USYS, USCS or AYSO. I also agree that said player pass will be carried with the team during the duration of the tournament (November 6th, 7th, 8th, 2026) and will be presented on demand to any tournament official.

I also understand that failure to present a valid player pass at any time to a tournament official, within 30 minutes of demand, will result in the forfeiture of all games and tournament fees, and notification of such will be forwarded to the team's state association for discipline.

Coach or Business Managers Signature:_____ Date:_____