



Registration Form

For Coaches & Administrators

Affiliation

League _____

Club _____

Team _____

Please Check All That Apply

<input type="checkbox"/> Coach <input type="checkbox"/> Assistant Coach <input type="checkbox"/> Team Manager <input type="checkbox"/> Team Parent	<input type="checkbox"/> AYSA Administrator <input type="checkbox"/> League Administrator <input type="checkbox"/> Club Administrator <input type="checkbox"/> Volunteer
---	---

Last Name _____ First Name _____ MI _____

Address _____ City _____

AZ	()				
State	Zip Code	Area Code	Telephone Number	Month Day Year Birthdate	Gender M or F

Preference for AYSA Mailings

All	AYSA Specific	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

E-mail address _____

Age Bracket _____ Coaching License _____ Referee Grade _____

1. Background in work with youth	Position _____	Year(s) _____
2. Experience in soccer	Position _____	Year(s) _____
3. Experience in youth soccer	Position _____	Year(s) _____

Have you filled out a Disclosure Form? Yes No Year _____

I understand that:

- a. It is the intent of the ARIZONA YOUTH SOCCER ASSOCIATION to deny certification to any person who has been convicted of a crime of violence or a crime against a person.
- b. In applying for an ARIZONA YOUTH SOCCER ASSOCIATION position, the information which I have furnished on this form is subject to verification, which may include a criminal history check.
- c. A disclosure statement must be updated at least every year.

Print Name _____

Signature _____ Date _____