



AYSO ID# _____

PLEASE FILL IN ALL OF THE REQUESTED INFORMATION AND SIGN WHERE INDICATED.

First Name		Middle Name		Last Name		Suffix			
Maiden Name (If married within the past 7 yrs.)			Social Security #		Birth Date		Section Area Region #		
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female		Driver License #		State	Expires	State ID#		State	Expires
Street Address							Apt. #		
City			State	Zip Code		Area Code	Home Phone		
E-mail						Area Code	Cell Phone		

Previous address if lived at current address less than 5 years:

Street Address		Apt. #	
City		State	Zip Code
Employer		Area Code	
Area Code	Work Number	Extension	Fax Number

RACE / ETHNICITY (Select One)

White or Caucasian Black or African American
 Hispanic or Latino Asian or Pacific Islander
 American Indian or Alaskan Native
 Other _____

For AYSO Regional Use Only
Current U.S. Driver License / State I.D. Verified By _____

I'M VOLUNTEERING FOR . . .

Coach Asst. Coach Team Parent Sponsor Picture Day Various Board Jobs
 Referee Field Setup Registration Scheduling Communications Other _____

IF ON THE BOARD, PLEASE INDICATE POSITION

RC CVPA Coach Admin Ref Admin Safety Director Treasurer Other _____

I want to coach my child(ren) and am including their name(s) and school(s):

Do you have past AYSO experience? Yes No
 If yes, what region/city? _____

PROFESSIONAL REFERENCE (Employment, school, church, or other organization)

Organization Name		Relationship/Affiliation					
First Name		MI	Last Name		Area Code	Number	Extension
Street			City		State	Zip Code	

PERSONAL REFERENCE (Non-relative, known at least 1 year and must be different from Professional Reference)

First Name		MI	Last Name		Area Code	Number	Extension
Street			City		State	Zip Code	

PRIOR VOLUNTEER REFERENCE (From your prior youth related experience, if any)

Organization Name		Your Position in Organization			Dates of Your Activity		
Reference First Name		MI	Reference Last Name		His/Her Position in Organization		
Street		City	State	Zip Code	Area Code	Number	Extension

DISCLOSURE: All applicants must answer the following two questions. Failure to answer honestly will disqualify the applicant from service as a volunteer in the American Youth Soccer Organization ("AYSO"). AYSO acceptance of an applicant will be based on existing AYSO Safe Haven policies available from the regional Child & Volunteer Protection Advocate or on-line at <http://soccer.org/Programs/SafeHaven/Background+Checking+Policy.htm>

1. Have you ever been convicted of a crime? YES NO
 2. Have you ever been subject to any court order involving any sexual, physical or verbal abuse including but not limited to any domestic violence or civil harassment injunction or protective order: YES NO
- If yes, describe each in full. Also indicate date(s) of crime(s) and in which city, county and state each took place. (Attach a separate sheet if needed.)

I HAVE READ THE ABOVE DISCLOSURE STATEMENT, AND THE WAIVER, CONSENT AND RELEASE OF LIABILITY, THE DISCLAIMER, ASSUMPTION OF RISK AND WAIVER AND ACKNOWLEDGEMENT AND CONSENT AGREEMENTS PRINTED ON THE REVERSE SIDE OF THIS FORM, FULLY UNDERSTAND THE TERMS OF EACH, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY MY SIGNING THIS FORM AND AGREEING TO THESE TERMS, AND I SIGN THIS FORM AND AGREE TO THESE TERMS FREELY AND VOLUNTARILY AND WITHOUT INDUCEMENT OF ANY KIND. FURTHERMORE, I AGREE TO INFORM AYSO IN A TIMELY MANNER IF ANYTHING ON THIS FORM OR ITS ATTACHMENTS CHANGES.

(continued on reverse)

Signature: _____ Date: _____

Please mail to me AYSO's official magazine:
Soccer Now YES NO
 Please send me other mailings YES NO

WAIVER, CONSENT AND RELEASE OF LIABILITIES: I hereby consent to the investigation and verification of all information given in this application, including searches of law enforcement and public records (including driving records and criminal background checks), contact with former employers and reference interviews. I hereby release and agree to hold harmless AYSO and its officers, employees and volunteers and any person or organization that provides information for or to AYSO concerning my background or any attempt to verify the information provided in this application. I declare that all of the information given by me in this application is true and complete to the best of my knowledge, and I understand that any misrepresentation or omission may be cause for suspension or dismissal from my volunteer status with AYSO. I understand that I have the right to receive a copy of any background check report secured by AYSO. If I have checked the adjacent box, please send me a copy of my background report. YES

If accepted as an AYSO volunteer, I hereby agree to abide by the AYSO Bylaws, rules, regulations, policies and philosophies, and all decisions and directions of the Regional Board of Directors, area and section staff, and the National Board of Directors, and I understand that I may be removed as an AYSO volunteer at any time with or without cause.

DISCLAIMER, ASSUMPTION OF RISK AND WAIVER: For myself, and on behalf of my heirs, assigns and next of kin, I acknowledge that participation in soccer necessarily involves travel, participation on adverse field conditions, contact with considerable force, and risk of severe, permanent physical injury including bruises, scrapes, strained, sprained or torn muscles, tendons or ligaments, broken bones, dislocation of joints, concussion, brain damage, nerve and spinal cord injury, paralysis and death. For myself, and on behalf of my heirs, assigns and next of kin, I willingly and voluntarily accept and assume all such risks of participation.

In consideration of accepting this application and permitting my voluntary participation in AYSO programs, for myself and on behalf of my heirs, assigns and next of kin, I hereby release, discharge and agree to hold harmless AYSO, its players, employees, volunteers, officials, sponsors and other representatives and any and all owners, lessors, lessees or other persons or entities allowing, permitting or authorizing the use of facilities by AYSO and the agents, employees, officers and directors of said person or entities from any and all claims, demands, costs, expenses and compensation arising out of or in any way related to any injury or other damage that may result to me or to members of my family or my household or individuals I invite or for whom I am otherwise responsible while participating in or present at any AYSO-sponsored event, including any physical or other injury caused by the negligence of any person or entity described above. I further acknowledge that AYSO is primarily administered by volunteers rather than paid professionals.

I agree the terms and conditions hereof shall apply to all of my volunteer participation in AYSO, regardless of the year or season in which such participation takes place, unless superseded by a new volunteer application.

I further acknowledge and accept that this Disclaimer, Assumption of Risk and Waiver is intended to be as broad and inclusive as permitted by the laws of the state in which participation takes place and agree that if any portion of this Disclaimer, Assumption of Risk and Waiver is deemed to be invalid, the remainder will continue in full legal force and effect.

ACKNOWLEDGEMENT AND CONSENT: I understand the terms of the Soccer Accident Insurance Plan are set forth in a pamphlet available from the safety director of my region or on-line at <http://soccer.org/Resources/Forms/Insurance+Forms.htm> and either I have read and understand the terms or I will do so before I volunteer. For both internal and external use, I acknowledge that AYSO may compile and use addresses and soccer photographs of me consistent with the AYSO Privacy Policy set forth at <http://soccer.org/AdminManagement/Legal/Privacy+Policy.htm>. I consent to such uses and hereby waive all rights to compensation.

(PLEASE SIGN AND DATE ON THE REVERSE SIDE)