

Northwest Ohio Youth Soccer League
Coach Registration Form * Fall 2009 – Spring 2010
Affiliated with USYS and OYSAN

Club Name: _____ Head Coach Assistant Coach

Team Name: _____ Age Group: _____ Male / Female

Coach Information:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Social Security Number, Last 4 Digits only: xxx-xx-_____ **For Risk Management Verification**
Expiration Date of Risk Management: _____

Birth Date: _____ Home Phone: _____ Cell Phone: _____

Work Phone: _____ Email: _____

License Grade: None A B C D E U9/10 U11/12 U13/14 License # _____
(Please circle one.)

As an USYS, OYSAN and NWOYSL coach, I hereby agree to follow and uphold all of the rules and regulations of the above named associations. I also understand that if I do not follow these rules and regulations, I will be subject to sanctions imposed by NWOYSL or OYSAN for my actions. In addition, I have signed and submitted the Risk Management (formerly KidSafe Disclosure Statement) to the OYSAN Office. (This form can be completed online at www.oysan.org). I discharge and/or otherwise indemnify the organization/league/club for which I am registering to coach, Ohio Youth Soccer Association North, its affiliated sponsors, employees and associated personnel, including the owners of fields and facilities utilized against any claim by or on behalf of myself as a result of my participation.

Coach Signature: _____ Date: _____

I agree to abide and follow the NWOYSL's bylaws. I will read, or have read the current by NWOYSL's Bylaws and will agree to follow the rules and regulations of the NWOYSL, OYSAN and USYS, and have or will sign the NWOYSL's Code of Conduct Form.

Coach Signature: _____ Date: _____

This form must accompany the Team's Registration to the League. All coaches who are currently participating in USYS, OYSAN, and/or NWOYSL activities of any kind must be properly registered every seasonal year with their team. Every team may register a maximum of three (3) coaches.

Clubs

I certify, by submitting this form, that either the person is known to the Club, or that a reference check was done that revealed nothing detrimental about the coach/volunteer. We recommend the above person be granted a coach membership with our Club for the Fall 2009/Spring 2010 seasonal year.

Club Representative
Signature _____ Date: _____