

# American Youth Soccer Organization

# Volunteer Application

Please fill in all of the information requested below and sign the form where indicated

Who am I?	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.	First Name	MI	Last Name	Suffix
	I'm Also Known As:		Nickname	Social Security #	
My Current Address is:	Street Address		Street Address Line 2		
	City	State	Postal Code		
My Home Phone # is:	Area Code	Number	My e-Mail is:		E-Mail
	I have lived at my current address less than 5 years. My previous address was:		Street Address		Street Address Line 2
My Employer's Name is:	Employer		Area Code		
	Area Code	Number	Extension	Fax:	Area Code
My Work Phone # is:	License #	State	Expires	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	
	State ID #	State	Expires	Birth Date	
OR	My Current State ID is:				

For AYSO Regional Use Only

Current Photo Verified By

Section \_\_\_\_\_ Area \_\_\_\_\_ Region \_\_\_\_\_

### I'M VOLUNTEERING FOR...

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

I want to coach my child(ren) and I am including the names of their schools

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

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

### DISCLOSURE STATEMENT

I have read and understand that I may be disqualified and prohibited from serving as an employee or volunteer of AYSO if, among other things, I have:

1. Been convicted (including crimes of record, which have been expunged and pleas of "no contest") of a crime of child abuse, sexual abuse of a minor, physical abuse, causing a child's death, neglect of a child, murder, manslaughter, felony assault or any assault against a minor, kidnapping, arson, criminal sexual conduct, prostitution related crimes, controlled substance crimes, or any other felony;
2. Been adjudged liable for civil penalties or damage involving sexual, physical or verbal abuse;
3. Been subject to any court order involving any sexual, physical or verbal abuse including, but not limited to, a domestic or protection order;
4. Had parental rights terminated;
5. A history with another organization (volunteer, employment, etc.) of complaints of sexual, physical or verbal abuse;
6. Resigned, been terminated or been asked to resign from a position, whether paid or unpaid, due to a complaint(s) of sexual, physical or verbal abuse; or
7. A history of behavior that indicated I may be a danger to children in the AYSO program.

Do any of these 7 statements apply to you?  Yes  No

If "Yes" Circle the statement number(s) below and attach an explanation to this form.

1 2 3 4 5 6 7

**WAIVER, CONSENT AND RELEASE OF LIABILITY:**

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 the use of 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.

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 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.

I further acknowledge that the American Youth Soccer Organization (“AYSO”) is primarily administered by volunteers rather than paid professionals.

In consideration of accepting the registration and permitting the voluntary participation in of the above-named participant in its programs, for myself and on behalf of my players, heirs, assigns and next of kin, I hereby release, discharge and agree to hold harmless AYSO, its 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 persons 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 said participant 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.

**ACKNOWLEDGMENT AND CONSENT:** I acknowledge receipt of the Soccer Accident Insurance pamphlet and I understand the terms of the Plan. I acknowledge that AYSO may compile and use addresses and soccer photographs of me for any purpose whatsoever. I consent to such uses and hereby waive all rights to compensation.

**I HAVE READ THE ABOVE DISCLOSURE STATEMENT, WAIVER, CONSENT AND RELEASE OF LIABILITY, DISCLAIMER, ASSUMPTION OF RISK AND WAIVER, AND ACKNOWLEDGMENT AND CONSENT AGREEMENTS, 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**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

<p><b>Please mail to me AYSO’s official magazine:</b>  <i>Soccer Now</i>   <input type="checkbox"/>Yes   <input type="checkbox"/>No</p> <p><b>Please send me other mailings</b>   <input type="checkbox"/>Yes   <input type="checkbox"/>No</p>
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