

OYSAN Coaches/Volunteer Registration Form

Seasonal Year 200____/20____

This is a form used to appoint coaches and others who have direct contact with players. All clubs, coaches, community clubs, or others who submit this form must either know the person or conduct a reference check.

League Name: _____

Club Name: _____ **Team Name:** _____

Coach Information:

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Numbers: Home _____ Work _____ Mobile _____

Email: _____

License Grade (Circle): A B C D E U9/10 U11/12 U13/14 None License Number: _____

Emergency contact name and number: _____

Please list unrelated references (name, address, and phone number)

1. _____

2. _____

As an OYSAN registered coach, I hereby agree to follow and uphold all of the rules and regulations of the Greater Akron Amateur Soccer Association ("GAASA"), the Ohio Youth Soccer Association North and US Youth Soccer, including but not limited to the GAASA Code of Conduct (the Code of Conduct can be found at www.gaasa.org). I also understand that if I do not follow these rules and regulations, I will be subject to sanctions by GAASA or state association for my actions. In addition, I have signed and submitted the Risk Management Statement to the State Office (this form can be completed online at www.oysan.org). I discharge and/or otherwise indemnify the organization/club for which I am registering to coach, GAASA, 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.

Signature: _____ Date: _____

The cost for coach's registration is the same amount as the players on any given team. This form must accompany the team's registration with the league. All coaches who are currently participating in OYSAN activities of any kind must be properly registered every seasonal year with their team. Every team must register all coaches on each team.

Leagues with Multiple Community Teams:

I certify by submitting this form that either the person is known to the club/community, or that reference checks were done and revealed nothing detrimental to the coach. By submitting this form, we recommend the above person and request that the person be appointed by the above league for the seasonal year referenced above.

Community/Club Representative: _____ Date: _____