

# OYSAN Coaches/Volunteer Registration Form \_\_\_\_\_ - \_\_\_\_\_ Seasonal Year

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

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

League Name: \_\_\_\_\_

Club Name: \_\_\_\_\_

Team Name: \_\_\_\_\_

### **Coaches Information:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

License Grade: A B C D E U9/10 U11/12 U13/14 None License Number: \_\_\_\_\_

Emergency contact name and number: \_\_\_\_\_  
\_\_\_\_\_

Please list two non-related 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 above named league, the Ohio Youth Soccer Association North and US Youth Soccer. I also understand that if I do not follow these rules and regulations, I will be subject to sanctions by my league or state association for my actions. In addition, I have signed and submitted the Risk Management (formerly KidSafe Disclosure Statement) to the State Office. (This form can be completed online at [www.oysan.org](http://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.

**Above Person 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 \_\_\_\_\_ - \_\_\_\_\_.

\_\_\_\_\_  
Community Representative

\_\_\_\_\_  
Date