



California Youth Soccer Association – South  
20 \_\_ - 20 \_\_ SEASON



PROGRAM ADMINISTRATOR REGISTRATION FORM

Rule 6.3.1.2.1 Program Administrators are defined as: State Board, Coaching Education staff, O.D.P. coaches and scouts, district, league and club officers, program directors, team managers, athletic trainers, coaches, assistant coaches, and substitute coaches, and anyone who has an official capacity in the soccer program.

PLEASE PRINT

\*A required field

\*\*At least one is a required field.

Parent/Admin Information

Program Admin Application

First Name\*

MI Last Name\*

Relation\* (if you have a child playing)

Title

Alias

Address 1\*

City\*

State\* Zip\*

Home Phone\*\*

Work Phone\*\*

Cell Phone\*\*

Fax

Email\*

Gender

 M - Male  
 F - Female

Parent/Admin Information

Program Admin Application

Admin Type\*\*

- Assistant Coach    Head Coach    Referee    Team Assistant    Team Manager    Team Parent
- Referee    Board Member    Clerical    Committee    Concessions
- Donor    Field Prep    Fundraising    Newsletter    Publicity    Special Projects

League\*

Club\*

Level of Play

Years Coaching

Team ID Number

- Competitive    Recreational

Identification\*\*

Identification is required for all Cal South Administrators. Note: This same form of identification must be utilized for the Cal South KIDSAFE LiveScan/fingerprinting process.

- Driver License # \_\_\_\_\_    Alien Reg/Immigration/Green Card # \_\_\_\_\_
- CA DMV ID # \_\_\_\_\_    Military ID Card # \_\_\_\_\_
- Passport # \_\_\_\_\_

I understand that:

- A. Cal South may deny participation to any person who has been arrested or convicted of a crime.
- B. In applying for a Cal South position, I am required to be subject to a criminal history check and subsequent arrest notification requiring fingerprinting.
- C. As a Program Administrator, I hereby agree to abide by league, club, Cal South, US Youth Soccer, USSF and FIFA Bylaws, rules, regulations, policies, and procedures. I further agree that I am accountable for knowing, understanding, and following the same Bylaws, rules, regulations, policies, and procedures.

Program Administrator Signature: \_\_\_\_\_ Date: \_\_\_\_\_