



Maryland State Youth Soccer Association  
AFFILIATED WITH THE UNITED STATES SOCCER FEDERATION

07/2001



ADULT OFFICIAL REGISTRATION FORM - Seasonal Year: 20\_\_\_\_ -- 20\_\_\_\_

It is Maryland State Youth Soccer Association, Inc. (MSYSA) policy to register all adults (age 18 years and older) who are working with affiliated players and teams. Registration with MSYSA is from September 1 through the following August 31. The Adult Official Registration Form must be updated every year.

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_

\_\_\_\_\_  
Mailing Address City State Zip

\_\_\_\_\_  
Residence Address (If Different) City State Zip

Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Social Security Number \_\_\_\_ - \_\_\_\_ - \_\_\_\_  
(MM) (DD) (YY)

Telephone (H) \_\_\_\_ - \_\_\_\_ - \_\_\_\_ Coaching License \_\_\_\_\_

Telephone (W) \_\_\_\_ - \_\_\_\_ - \_\_\_\_ Referee Grade \_\_\_\_\_

E-Mail Address \_\_\_\_\_ (For MSYSA Internal Use Only)

Club Affiliation(s) \_\_\_\_\_

1. Background in work with youth Position \_\_\_\_\_ Years \_\_\_\_\_

2. Experience in soccer Position \_\_\_\_\_ Years \_\_\_\_\_

3. Experience in youth soccer Position \_\_\_\_\_ Years \_\_\_\_\_

4. Position (Check appropriate box(es))  
 Coach  Asst. Coach  Manager  Trainer  
 Administrator  Club/League Official  Other

5. Have you ever been convicted of a crime of violence?  Yes  No

6. Have you ever been convicted of a crime against a person?  Yes  No

(If Yes to Questions 5 and/or 6, please explain - use back of form)

I understand that:

- a. It is the intent of the MSYSA and US Youth Soccer to deny registration to any person who has been convicted of a crime of violence or of a crime against a person.
- b. In applying for an MSYSA or US Youth Soccer position the information which I have furnished on this form is subject to verification, which may include a criminal history check.
- c. I am agreeing to uphold and be bound by MSYSA and USYSA Bylaws, Policies and Procedures.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Registrar Signature \_\_\_\_\_ Date \_\_\_\_\_



THIS COPY FOR:  TEAM OFFICIAL  TEAM REGISTRAR  MSYSA OFFICE  \_\_\_\_\_