



APPLICATION FOR NEW CLUB

10427 W. Lincoln Avenue, Suite 1100
West Allis, WI 53227-2136
www.wiyouthsoccer.com

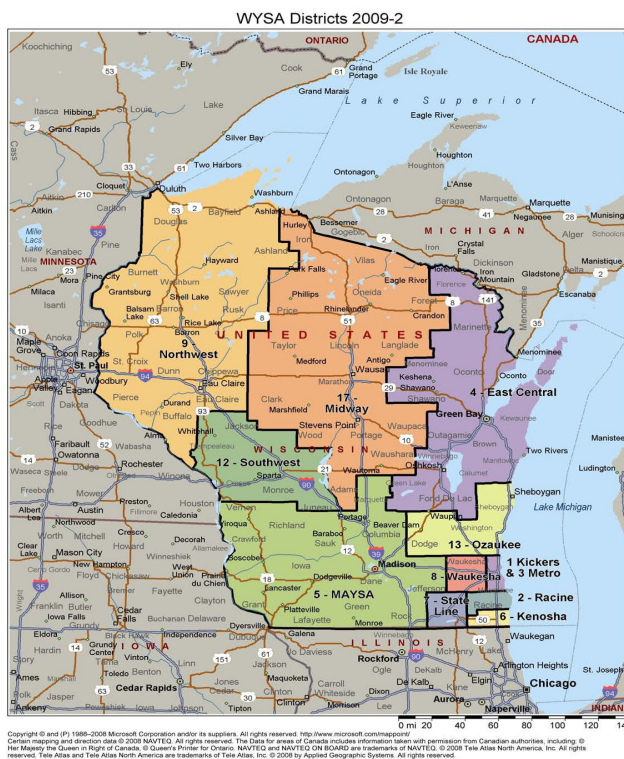


When submitting your New Club Application, the following documents must be included in the application packet:

1. Officers' Information Form
2. New Club Information Form
3. Site Usage Form
4. Copy of club's constitution & by-laws
5. Application fee (\$125 check payable to Wisconsin Youth Soccer Association)

For additional assistance in completing this application for a new club, please contact the State Office at 414-328-9972. Applications received without all required information, documentation or application fee will be returned to the listed club president.

RECOGNIZED WISCONSIN YOUTH SOCCER ASSOCIATION DISTRICTS



New Club Application

OFFICERS' INFORMATION

Name of Club _____

President ** _____

Address ** _____ City _____ Zip _____

Home Phone ** _____ Work Phone _____

E-mail ** _____

Vice President: _____

Address _____ City _____ Zip _____

Home Phone _____ Work Phone _____

E-mail _____

Secretary: _____

Address _____ City _____ Zip _____

Home Phone _____ Work Phone _____

E-mail _____

Treasurer ** _____

Address ** _____ City _____ Zip _____

Home Phone ** _____ Work Phone _____

E-mail ** _____

Registrar ** _____

Address ** _____ City _____ Zip _____

Home Phone ** _____ Work Phone _____

E-mail ** _____

Coach Coordinator ** _____

Address ** _____ City _____ Zip _____

Home Phone ** _____ Work Phone _____

E-mail ** _____

**REQUIRED FIELDS

NEW CLUB – INFORMATION

1. Is your club currently affiliated with another WYSA member club? YES NO (circle one)

If yes, please provide club's name: _____

2. Is your club currently affiliated with another USSF affiliated organization? YES NO (circle one)
(AYSO, SAY, etc.)

If yes, please provide organization's name: _____

3. Federal Employer Identification Number (FEIN) (**required**): _____

4. Wisconsin State Sales Tax Exemption Certificate Number (**required**): _____

5. Are you recognized as a tax-exempt organization under IRS Code 501(c)3? YES NO (circle one)

6. The club will register approximately how many players? _____

7. The club will register approximately how many coaches? _____

8. The club will have teams at which age groups? (Please check all that apply)

U6	<input type="checkbox"/>
U7	<input type="checkbox"/>
U8	<input type="checkbox"/>
U9	<input type="checkbox"/>
U10	<input type="checkbox"/>
U11	<input type="checkbox"/>
U12	<input type="checkbox"/>
U13	<input type="checkbox"/>
U14	<input type="checkbox"/>
U15	<input type="checkbox"/>
U16	<input type="checkbox"/>
U17	<input type="checkbox"/>
U18	<input type="checkbox"/>
U19	<input type="checkbox"/>

The club will register approximately how many teams? _____

9. Players will register at which point of the seasonal year? (Please check all that apply)

Fall Only	<input type="checkbox"/>
Spring Only	<input type="checkbox"/>
Summer Only	<input type="checkbox"/>
Fall and Spring	<input type="checkbox"/>
Spring/Summer	<input type="checkbox"/>

SITE USAGE FORM

Club _____

Club President _____

Address _____ City _____ Zip _____

Home Phone _____ Work Phone _____

Please list all fields, sites, etc. that the club will use for practices, games and events. This may include, but is not limited to, schools, churches, park & recreation facilities, private lots, etc. These locations may require certificates of liability insurance on behalf of the Wisconsin Youth Soccer Association affiliated soccer club. If more sites are used, make copies of this form.

1. Site Name _____
Address _____
City _____ Zip _____
Contact Person _____

2. Site Name _____
Address _____
City _____ Zip _____
Contact Person _____

3. Site Name _____
Address _____
City _____ Zip _____
Contact Person _____

4. Site Name _____
Address _____
City _____ Zip _____
Contact Person _____

5. Site Name _____
Address _____
City _____ Zip _____
Contact Person _____