

ARIZONA

 YOUTH SOCCER ASSOCIATION
Referee Disclosure Form
 PLEASE PRINT CLEARLY

Last Name _____ First Name _____ Middle Name _____

Street Address _____ City _____ State _____ Zip _____

(Street address required, P.O. Box will not be accepted)

EMAIL ADDRESS _____

Gender: M__ F__ Phone _____ Date of Birth _____ DL# _____ DL State _____

If a resident of Arizona for less than 5 years, my previous city and state of residence was: _____

of Yrs as a soccer ref _____ Referee Grade _____ Which States _____

Date of last re-cert _____

Please identify your current position(s) by checking all that apply below:

Rec. Coach Comp. Coach ODP Staff Board Member
 Referee Administration Team Manager Parent Volunteer

1. Background in work with youth Position _____ Years _____

2. Experience in soccer Position _____ Years _____

3. Experience in youth soccer Position _____ Years _____

Please Respond to Each Question. Check the appropriate answer; explain all yes responses on back

- | | | |
|---|------------|-----------|
| 1. Have you ever been convicted of a crime of violence or a crime against a person? | Yes | No |
| 2. Have you ever been convicted of a felony? | Yes | No |
| 3. Have you even been subject to any court order involving sexual, physical or verbal abuse, including, but not limited to, a domestic or protection order? | Yes | No |
| 4. Have you ever been adjudged liable for civil penalties or damages? involving sexual, physical abuse? | Yes | No |
| 5. Have you ever been asked to resign from any position, paid or unpaid, due to complaint(s) of sexual, physical, or verbal abuse? | Yes | No |
| 6. Do you have any history of sexual, physical or verbal abuse? | Yes | No |
| 7. Have you been suspended from coaching or refereeing youth soccer, or any youth sport for a period of more than 6 months in any state? If so, please indicate when and where on reverse of this form. | Yes | No |
| 8. Do you have a conviction for the use, possession and/or sale of an illegal substance? | Yes | No |

Read carefully prior to signing below:

I agree that I will abide by the rules of US Youth Soccer and its affiliated organizations (including the Arizona Youth Soccer Association, AYSA). It is the intent of the Arizona Youth Soccer Association to accept coaches, administrators, volunteers, and to utilize referees without a prior history of violence, child abuse and/or neglect, or felony conviction(s). The information given in this statement is subject to verification by the Arizona Youth Soccer Association through any background check organization chosen by AYSA. I understand that I may be required to be fingerprinted for a Department of Public Safety and/or Federal Bureau of Investigation criminal check. Reports may be compiled with information from court repositories, Department of Motor Vehicles, past or present employers and educational institutions, governmental occupational licensing or registration entities, business or personal references, and any other source required to verify information that I have voluntarily supplied. I understand that I may request a complete and accurate disclosure of the nature and scope of the background verification; to the extent such investigation includes information bearing on my character, general reputation, or personal characteristics. I also understand that any false or misleading information that I provide on this form will result in automatic denied membership for a minimum period of 6 months in the Arizona Youth Soccer Association and being barred from any and all sanctioned activities. **This registration/disclosure statement must be updated every year.**

Applicant Signature _____ Printed Name _____ Date _____

**SEND COMPLETED FORMS TO:
 11029 N. 24th Avenue Ste 805-806 Phoenix, AZ 85029 | (602)433-9202 | Fax (602)433-9221**