

EMPLOYMENT/VOLUNTEER DISCLOSURE STATEMENT

Youth Form (Under 18 years of age)



Please print clearly and complete this form in full. Return to your local association Risk Manager.

FIRST NAME	MIDDLE INITIAL	LAST NAME	
STREET ADDRESS	CITY	STATE	ZIP CODE
HOME PHONE	BUSINESS PHONE	DATE OF BIRTH	
COACHING LICENSE	REFEREE GRADE	GENDER <input type="checkbox"/> M <input type="checkbox"/> F	
DRIVER'S LICENSE NO. (If Applicable)	STATE	EXPIRATION	
ASSOCIATION	Position (Check all that apply) <input type="checkbox"/> Coach <input type="checkbox"/> Manager <input type="checkbox"/> _____ <input type="checkbox"/> Referee <input type="checkbox"/> Volunteer		

PLEASE COMPLETE IN FULL:

1. Previous residence(s) (for last 5 years) City _____ State _____
2. Have you ever been convicted of a crime of violence? YES NO
If yes, please explain: (Use the back of form if necessary)
3. Have you ever been convicted of a crime against a person? YES NO
If yes, please explain: (Use the back of form if necessary)

I understand that:

- a. It is the intent of South Dakota State Soccer Association and USYSA to deny certification to any person who has been convicted of a crime of violence or of a crime against a person.
- b. In applying for a SDSSA/USYSA position, the information which I have furnished is kept in confidence because I am under the age of 18. If it is found that I have given false or incomplete information, I will be subject to immediate dismissal.
- c. This disclosure statement must be updated as required by the South Dakota State Soccer Association.

Signature	Printed Name	Date
Parent/Guardian Signature	Printed Name	Date