



CfW UfX`J U`YmiMci H `GcWWf`@U[i Y
 `7 cUW Yg`5 dd`jWUjcb`

DF9: 9FF98`7C57<-B; `DCGHC B`														
Boys			Girls			Black 'A' Team			Red 'B' Team			White 'C' Team		
Age Group	2008	2007	2006	2005	2004	2003	2002	2001	2000	1999	1998	1997		
5 DD@7 5 BH-B: CFA5 HCB`														
Last Name								First		M.I.				
Street Address										Apartment/Unit #				
City										State		Zip Code		
Home Phone						Work Phone								
Cell Phone						E-mail Address								
7 C57<-B; `9LD9F`9B79`														
GcWWf`7 cUW]b[`9I dYf]YbWV.`														
Number of Years Coached						Age(s) Coached								
Coach License(s)						Referee Grade:			Refereed 3 games in past year			YES	NO	
CH Yf`Gdcftg`7 cUW YX.`														
Sport(s)						Number of Years Coached								
Age(s) Coached						Coach License(s)								
Reason(s) you Wish to Coach:														
5 88 HCB5 @EI 9GHCBG`														
Do you agree to abide by OVYSL Policies and Procedures?				YES	NO	Do you plan to attend the next available Referees License Class, if currently not licensed?				YES	NO			
Do you agree to attend all the Coaches' meetings and clinics?				YES	NO	Do you plan to pursue a Coaching License? (Note: All Red and Black coaches are now required to attend at least one CYSA or NSCAA license course per year until eventually obtaining a CYSA D License or equivalent.)				YES	NO			
Do you have any children currently playing for a soccer club other than OVSC? If so, which club?				YES	NO	Are you interested in becoming an OVYSL Board Member?				YES	NO			
Do you use illegal drugs?				YES	NO	Have you ever been convicted of a felony? (If yes, please explain)				YES	NO			
Is there any fact or circumstance involving you or your background that would call into question your being entrusted with the supervision, guidance and care of young people (If yes, please explain)										YES	NO			
8 -G7 @-A9F`5 B8 `G; B5HI F9`														
I certify that my answers are true and complete to the best of my knowledge. I understand that false or misleading information in my application may result in my disqualification as a coach.														
With your signature you agree to comply with OVYSL policies and procedures which includes, but is not limited to the following: tryout process rules, adhering to B & C teams being a feeder into A team (A team gets first choice), attending coaches meetings, clinics or classes, turf compliance, OSC Rules, uniforms, registration duties, license upgrades, etc.														
Signature:								Date:						

E-Mail application along with scanned coach & referee licenses to:

ovsc.doc@gmail.com

Website: www.ovysl.org