



**Madison Youth Soccer Club
Travel Team Coaching Application**

Name: _____

Address: _____

Home Phone: _____

Work Phone: _____

Email Address: _____

New Application: _____ Re-Application: _____

Head Coach: _____ Assistant Coach: _____

Team Type: (check only one)

Boys _____ Girls _____ Comp _____ Rec _____

U10 ___ U11 ___ U12 ___ U13 ___ U14 ___ U16 ___ U19 ___

Previous MYSC Experience: _____

Other Sports Coaching Experience: _____

Previous Sports Participation: _____

Other Youth Orientated Civic, Scholastic Experience: _____

Health Restrictions: _____

Time Restrictions: _____

Applicants written philosophy, qualifications and reasons for wanting to coach MYSC Travel Team: _____

Have you read the latest CJSA guide to junior soccer? Y N

Have you read the FIFA laws of the game? Y N

I have read the MYSC travel program regulations and will adhere to this policy in performing the position of a travel team coach? Y N

Signed: _____ Date: _____

MYSC Board Use Only

Accepted: _____ Rejected: _____ Season: _____

Comments: _____
