## California Soccer Association North 1348 Silver Avenue, San Francisco, CA 94134-1226

## **ANNUAL MANDATORY TEAM FORM**

Name of Club	Ye	ar Founded
Name of League		
Manager of Club	Phone: (	)
Address	City	Zip
Coach of Club	Phone: (	)
Player passes mailed to:	Phone: (	)
Address:	City	Zip
Email address for the club:		
SOCCER CLUB OFFICERS FO	R THE SEASON OF:	
President	Phone: (	)
Address	City	Zip
Secretary	Phone: (	)
Daytime phone no. to contact club: ( )	Person to contact:	
STATEMENT O	F ORGANIZED MANAGEMENT	
Check one: Supported by individual only { }	by Club dues paying member { }	by Sponsorship { }
Name of Organization		
Person responsible	Phone: (	)
Address	City	Zip
I certify that I am the legal Owner/President of the clul	o and the above are true and correct unde	er penalty of Bond:
X	Title	Date
As past Owner/President, I agree to release all holdin	gs of the club (given or implied) to the nev	v President.
x	Title	Date
The above Club is sanctioned by the (League) _		
to register players for the (Season)	(Lg. Officer) X	

Please note: This is a MANDATORY form for each team. It must be submitted to CSAN once each year prior to the start of your league's season. Player Passes and/or Player Registration forms will only be sent to teams that have submitted this form. All lines on this form MUST have the appropriate information filled in and signed before it will be accepted by CSAN.