

California Soccer Association North 1346 Silver Ave. San Francisco, CA 94134 Phone: 415-467-1881 www.csan.net

TEAM ANNUAL MANDATORY FORM		
Name of Club:		
Name of League:		
Manager of Club:		Phone:
Address:		
City:	State:	ZIP Code:
Coach of Club:		Phone:
Address:		
City:	State:	ZIP Code:
Address:		
City:	State:	ZIP Code:
Email address for club:		
SOCCER CLUB OFFICERS FOR THE SEASON OF: 2022-2023		
President:		Phone:
Address:		
City:	State:	ZIP Code:
Secretary:		Phone:
Address:		
City:	State:	ZIP Code:
Daytime phone to contact club:		Contact Person:
STATEMENT OF ORGANIZED MANAGEMENT		
Check one: Supported by Individual only \Box	Club Dues Paying Members 🗆	By Sponsorship 🗆
Name of Sponsoring Organization:		
Contact Person at Sponsoring Organization:		Phone:
Address:		
City:	State:	ZIP Code:
Relationship:		
TEAM AND LEAGUE SIGNATURES		
I certify that I am the legal Owner/President of the club and the above are true and correct under penalty of Bond:		
Signature of applicant:		Date:
Transfer of Team Ownership (if applicable): As past Owner/President, I agree to release all holdings of the club to the new Owner/President.		
Signature of past Owner/President:		Date:
The above Club is sanctioned by the League to		register players for the 2022-2023 season.
Signature of League Officer:		Date:
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		